

Primary Care Teams in Veterans Health Administration Have High Knowledge of Universal HCV Screening But Favor System -Level Interventions to Close Care Gaps

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Background

Results

Conclusion

- The United States Preventive Services Taskforce recommended one-time Hepatitis C virus (HCV) screening for all adults aged 18-79 in 2020¹
 - Unknown is
 - knowledge of screening guidelines amongst primary care providers (PCP)
 - Barriers to screening
 - Preferred screening tools
- Study Aims**
- Understand perspectives on, and barriers to, primary care team implementation of universal HCV screening
 - Understand which screening tools are preferred by PCPs for HCV screening

Methods

- Survey**
- 24-item online survey distributed to PCPs at the VA Greater Los Angeles Healthcare System (VAGLAHCS)
 - PCPs included physicians, pharmacists, and advanced practice practitioners (APP) on ED and primary care teams
- Analysis**
- Descriptive statistics were completed to compare item responses across demographics.
 - Hypothesis testing was performed using Wilcoxon rank sum test for continuous variables and Fisher's exact or Chi-square tests for categorical variables

Table 1. Proportion of PCPs Knowledgeable of Universal HCV Screening

	N (%)
Yes- were aware of Universal HCV Screening	59 (59)
No- were not aware of Universal HCV Screening	41 (41)

● Of 100 respondents, majority (59%) knew about universal HCV screening guidelines.

Table 2. Baseline Characteristics

	Median [IQR] or N (%)
Age	42 [32, 52]
Gender	
Male	35 (36)
Female	63 (64)
Race	
White	38 (39)
Black or African American	5 (5)
Latinx	2 (2)
Asian, Native Hawaiian, and Pacific Islander	46 (47)
Other	7 (7)
Training	
Physician	53 (54)
Pharmacist	11 (11)
Advanced Practice Practitioner	34 (34)
Other	1 (1)
Primary Specialty	
Internal Medicine	47 (47)
Family Medicine	18 (18)
Geriatrics	11 (11)
Other	23 (23)
Number of years since completion of most recent healthcare professional degree	
15 or more years	22 (28)
10 to <15 years	15 (19)
5 to <10 years	16 (20)
<5 years	26 (33)

Note: Not all participants answered all questions

- PCPs were majority female, physicians, identifying as Asian, Native Hawaiian, and Pacific Islander, and specialized in internal medicine
- Most PCPs completed their most recent healthcare degrees either within 5 years or ≥ 15 years

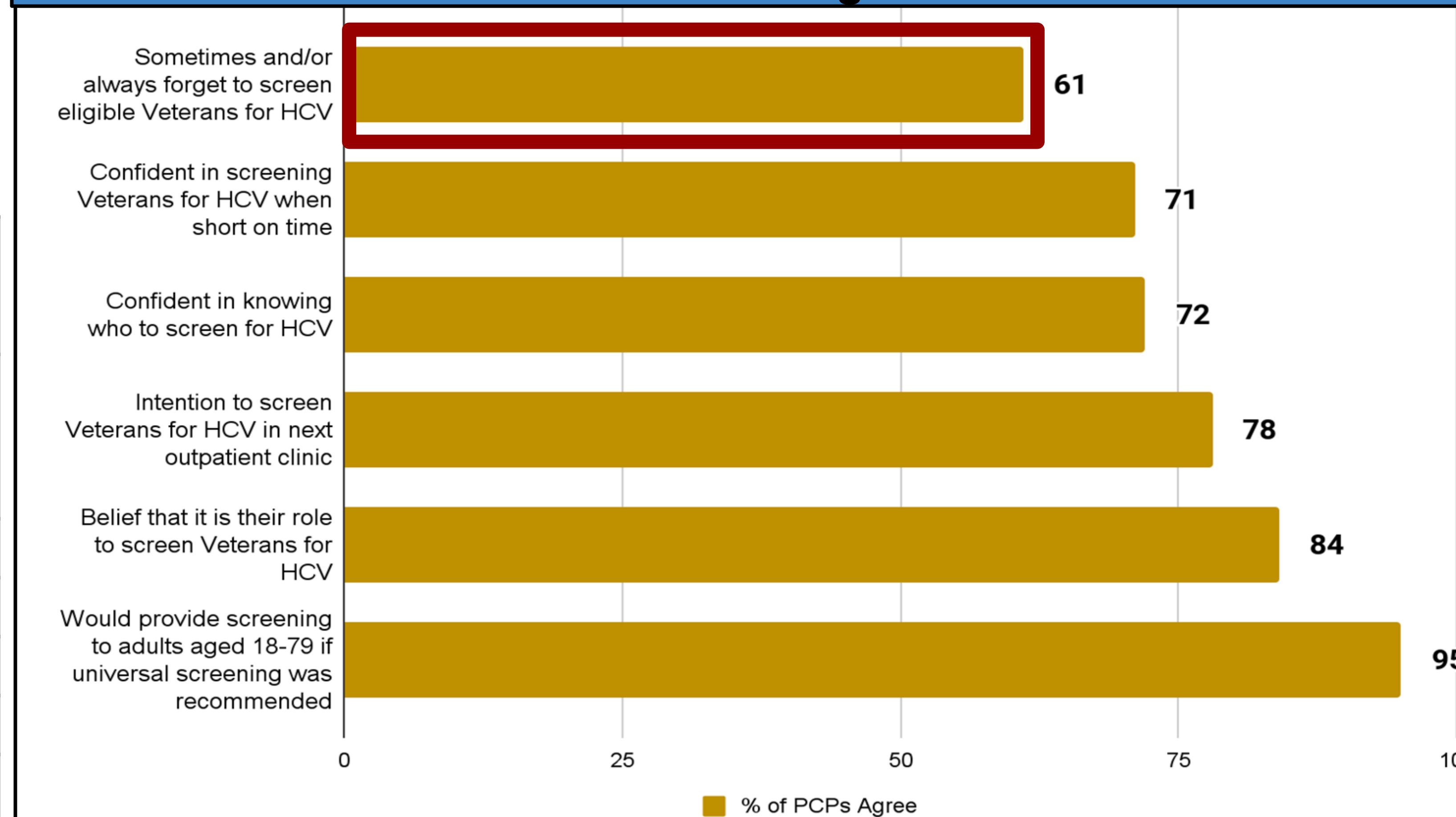
Table 3. Determinants of Universal HCV Screening Knowledge

	Knowledgeable N (%)	Not Knowledgeable N (%)	P-Value
Gender			0.002
Male	28 (80)	7 (20)	
Female	30 (48)	33 (52)	
Training			0.05
Physician (MD or DO)	37 (70)	16 (30)	
Pharmacist	6 (55)	5 (45)	
Advanced practice practitioner	14 (41)	20 (59)	
Other	1 (100)	0 (0)	
Years since completion of most recent degree			0.02
15 or more years	15 (68)	7 (32)	
10 to <15 years	7 (47)	8 (53)	
5 to <10 years	6 (38)	10 (63)	
<5 years	21 (81)	5 (19)	

Note: Not all participants answered all questions

- Physicians were more knowledgeable compared to pharmacists and APPs (70% vs 55% & 41%, p=0.05)
- PCPs who completed their degrees less than 5 years ago and more than 15 years ago were most knowledgeable about Universal HCV Screening Guidelines (81% and 68% respectively, p=0.02).

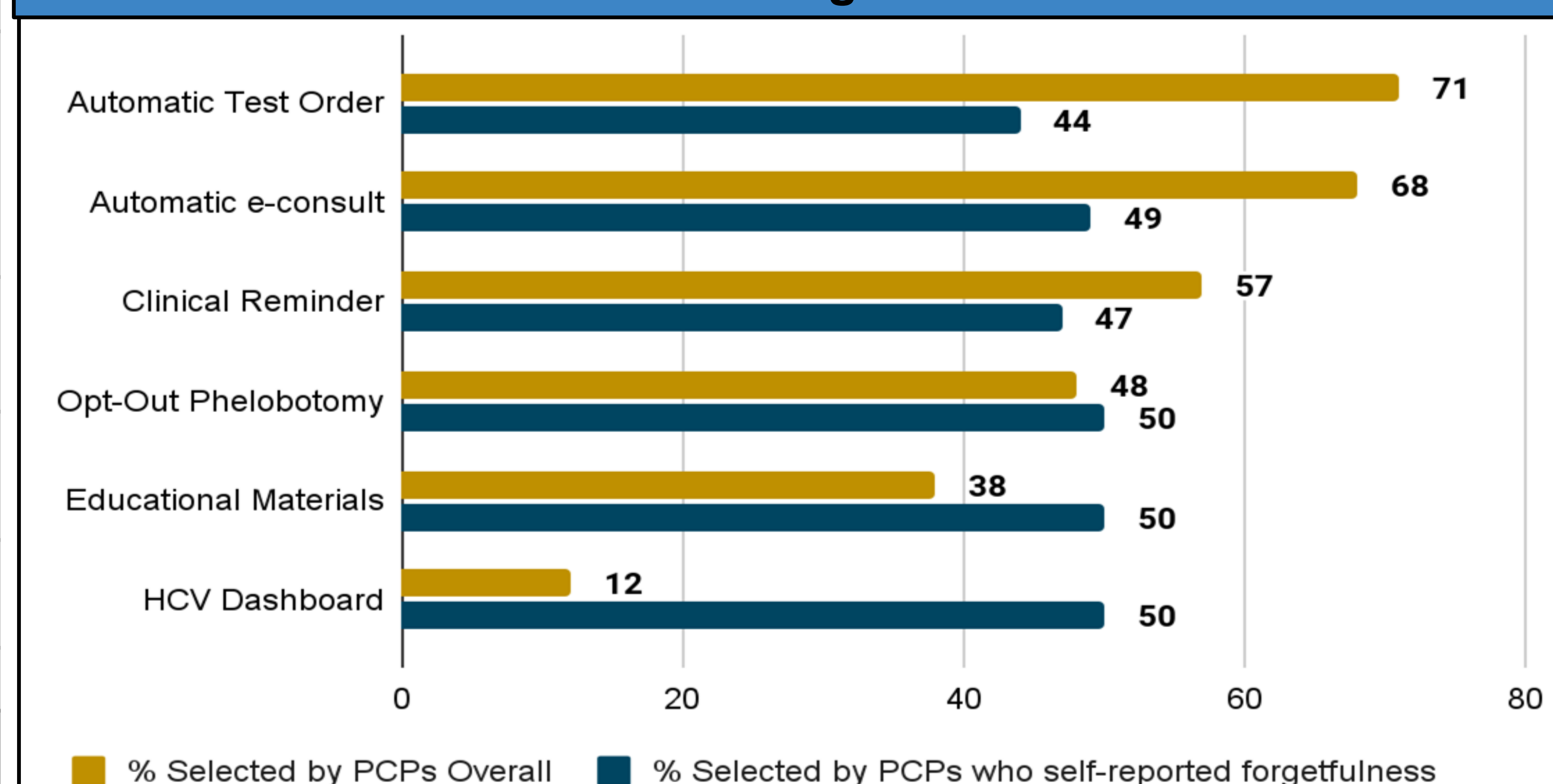
Self-reported forgetfulness was the largest barrier to HCV screening



Note: Participants were allowed to make multiple selections

- Self-reported forgetfulness was a barrier in screening: 61% of PCPs forgot to screen eligible Veterans for HCV
- 95% of PCPs reported they would provide HCV Screening to adults aged 18-79 if universal HCV screening was recommended.

Automatic test orders and e-consults were most preferred screening tools



Note: Participants were allowed to make multiple selections

- Automatic test orders and automatic e-consults were the most preferred tools for PCPs (71% & 68% respectively).
- Among those who self-reported forgetfulness, Opt-Out Phlebotomy and HCV dashboard were the most preferred screening tools.

- 3 in 5 PCPs were aware of new universal HCV screening recommendations.
- Self-reported forgetfulness in screening HCV was the most common barrier
- Several strategies to implement universal HCV screening were acceptable
 - Automated test orders were particularly desirable

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References

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1. "HCV Guidance: Recommendations for Testing, Managing, and Treating Hepatitis C." *Recommendations for Testing, Managing, and Treating Hepatitis C | HCV Guidance*, American Association for the Study of Liver Disease (AASLD), <https://www.hcvguidelines.org/>.