

Diagnosing Hepatitis C

How can health care providers prevent barriers to diagnose Hepatitis C in baby boomers?

Introduction

There is ongoing action worldwide to detect those who have an undiagnosed Hepatitis C virus (HCV) in the “baby boomer” age group. This group in particular has a high susceptibility to the virus due to unscreened donor blood prior to 1992, intravenous drug use and unhygienic tattooing practices. Approximately half of people with Hepatitis C virus infection in New Zealand are unaware they have it, posing a risk to themselves and the community (Centres of Disease Control and Prevention, 2017).

Literature Review—Barriers to diagnosis

Knowledge deficit

- 93% of the public did not know that HCV can be asymptomatic
- Poor health literacy is an indicator of a lack of knowledge surrounding HCV
- It is widely unknown that funded treatment is available (Vermunt et al., 2015).

Stigma

- Assumption that the person must be an intravenous drug user is common (The Best Practice Advocacy Centre New Zealand, 2016)
- Referrals to support psycho-emotional aspects of the diagnosis are recommended (Turner, Craig, Makanji, Flores, and Hernandez, 2017)

Prognosis

- 75% of HCV sufferers are born between 1945-1965. Now 40-50 years post infection, chronic liver disease, fibrosis, cirrhosis, and Hepatocellular carcinoma are becoming apparent (The Centres of Disease Control and Prevention, 2017).
- Within the next 22 years the cirrhosis rate will increase in the untreated population as will hepatic decompensation and liver related deaths (Davis, Albright, Cook, and Rosenberg, 2003).

Recommendations, Implications and Conclusion

Point of Care testing – a finger prick blood test which detects the presence of anti-hepatitis C antibodies is fast, cost effective, and can be done by a trained GP or pharmacist (Personal communication).

Promotion of funded medications – fully funded treatments are available for genotype one patients and those with advanced liver disease which cure 90% of sufferers (The Best Practice Advocacy Centre New Zealand, 2016).

If we routine screen this age group, we can diagnose more patients and in turn, reducing strain on health care providers due to comorbidity conditions in the future (Vermunt et al., 2015).

While the infection rate has significantly dropped since the baby boomer era, the lasting effects of the infection are present and the level of HCV knowledge is concerning. More testing, diagnosing, support, and treatment need to be undertaken to accomplish the WHO goal of eradication of Hepatitis C by 2030.

The HCV infection can live outside the body in dried blood for up to 3 weeks (Soulie et al., 2016)

References

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Rationale

Choosing the right media outlet to present literature is vital to capture the audience being presented to. While deciding which media to use for presentation, I asked myself what did I want the media to achieve? My answer was for people to look at it and learn something new in a short timeframe, and for that to happen it needed to be appealing. I chose a poster for my presentation as I believe it provides the best outlet for knowledge transfer. The poster will be presented to health care professionals, teaching staff, and the public so using a poster caters to all by providing basic and easy to understand information in a timely manner (Ilic & Rowe, 2013). To draw attention to my poster, the visual appearance had to be eye catching and well presented. I, as the presenter, had to take this into account and understand that while my priority was to transfer knowledge, I first had to gain the reader’s attention. I done this by using a background which did not make the information hard to read and I used a clear logical layout of information which is easy to follow (Arslan, Koca, Tastekin, Basaran, & Bozcuk, 2014).

PECOT category	Information relating to question	Explanation
Population	Baby boomers born from 1945-1965	This age group is five times more likely to have Hepatitis C than any other age group due to the highest infection rates happening between 1945-1965 (Luo, 2017).
Exposure (Intervention)	Those who had received a blood transfusion, been an intravenous drug user or got a tattoo or body piercing in an unsterile environment (Lao, 2017)	Upon researching articles, I found that these are the top three ways infected blood can transmit to a new host. I will be looking at how can we remove barriers to diagnose these individuals.
Comparison/Control	People born after 1965	Due to advanced techniques, donated blood screening and hygiene promotion
Outcome	A positive or negative blood test result for Hepatitis C	Priority is focused on reaching and screening potential sufferers, rather than the outcome
Time	NA	NA

(Schneider & Whitehead, 2013)

References

Arslan, D., Koca, T., Tastekin, D., Basaran, H., & Bozcuk, H. (2014). Impact of Poster Presentations on Academic Knowledge Transfer from the Oncologist Perspective in Turkey. *The Asian Pacific Journal of Cancer Prevention*, 15(18), 7707-7711. doi:10.7314/APJCP.2014.15.18.7707

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