

Screening, Testing and Counseling: First Steps in an Organized Approach to Hepatitis C

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Key points

- VA has a systematic approach to risk factor screening for all veterans in VA care.
- As a result, nearly all veterans in VA care have been screened for risk factors.
- Blood tests are offered to any veteran with identified risk factors, or who wishes to be tested regardless of risk assessment results.
- Last year, over 47,000 veterans in VA care had a positive blood test for hepatitis C.
- Education and prevention counseling are provided along with testing.
- Systems are in place to ensure test results are accurate and complete.

A systematic approach to screening and testing

The process of identifying veterans infected with hepatitis C begins with a program of asking all veterans receiving care in VA facilities about risk factors known to be associated with hepatitis C. These risk factors include all those recognized by the Centers for Disease Control, as well as Vietnam-era military service because the largest group of infected veterans served during this period.

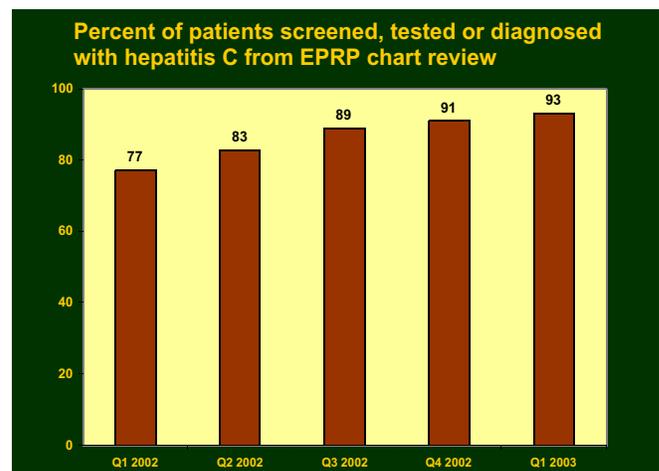
Risk factor screening before testing is important for several reasons. First, it is important for medical care providers to know about these factors, many of which are also associated with other communicable diseases. Second, it allows an opportunity for discussion about hepatitis C and how it is transmitted. Finally, it makes the testing process more accurate, since most false-positive tests occur in those at low risk.

Universal risk factor screening and the offering of blood tests to all those with identified risks for hepatitis C, as well as for any veteran who requests a test, are official VA policy, outlined in an Information Letter from the Under Secretary for Health in 1998. In addition, since fiscal year 2002, screening and testing for hepatitis C have been part of the performance measures that VA medical care providers and administrators are accountable for in their performance contracts.

Results of a highly successful screening program

VA has several ways of measuring the success of the screening and testing program. By all measures available to us, these programs have been extremely successful. VA has the largest and most successful hepatitis C screening and testing program in the country.

The External Peer Review Program (EPRP) is one way of measuring the results. This program consists of professional, medically trained chart reviewers looking in a sample of medical records



of VA patients to see if care is meeting defined standards. The chart reviewers are not VA employees, but work for a well-respected medical institute under contract to the VA. EPRP began including hepatitis C screening in their chart reviews in FY2002. The results have shown steady improvement in rates of screening during every quarter. In the most recent period, the first quarter of fiscal year 2003, over 93% of over 8,000 charts that were reviewed contained evidence of screening for risk factors. Only 1% of patients who were identified at risk had not received a blood test or a prior diagnosis of hepatitis C.

Since the VA has an entirely electronic medical record system, there are opportunities to use this system to achieve important medical goals. The Clinical Reminder System prompts medical care providers to perform specified preventive and disease management activities. A Clinical Reminder for hepatitis C testing has been implemented throughout the VA system that reminds about need for screening, documents the results of the screening, and allows us to track nationally the number of risk factor assessments. Since data were first collected in 1999, over 2.9 million risk factor assessments have been recorded.

Diagnostic testing for those at risk

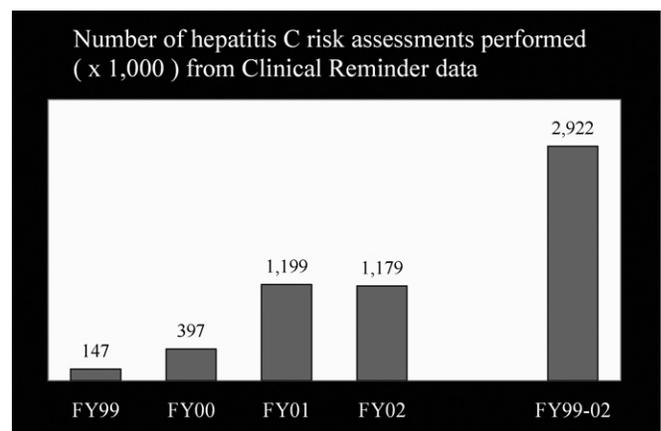
The Emerging Pathogens Index (EPI) is a VA system for monitoring clinical activity related to a number of infectious diseases. EPI collects national data from VA laboratories about blood tests for hepatitis C. Since some patients request a blood test without identifying a specific risk, and some people are tested more than once, the number of tests is only a rough estimate of the number of veterans with known risk. However, the large number of tests being performed is an indicator of the level of awareness of and importance attached to hepatitis C by VA clinicians and patients. During the

most recent 12-month period for which figures are available, over 480,000 hepatitis C antibody tests were performed in VA facilities. During fiscal year 2002, over 47,000 veterans had a positive test result (although some of these were not being tested for the first time). Eventually, as the organized screening and testing program reaches more and more veterans, the number of new positive tests each year will probably start to decline.

Counseling and education

The process of risk factor screening and diagnostic testing offers an important opportunity for education and counseling about hepatitis C. The counseling process begins before testing to help veterans understand the risk factors for hepatitis C and to decide whether they should be or want to be tested. For those who have ongoing risk of acquiring infection, the counseling includes ways to decrease risk. For those who test positive, counseling is provided to help understand the disease process and how to avoid passing the virus on to others.

The "Hepatitis C Testing and Prevention Counseling Guidelines for VA Health Care Practitioners" were published in 2001. Any health care professional who sees patients at risk for hepatitis C can perform counseling and testing. In addition, many facilities have specially trained counselors who can provide additional information and services about hepatitis C, HIV and other infectious diseases. VA is currently conducting training for these counselors at sites around the country to improve access to well-trained counselors.



Number of veterans with a positive hepatitis C test result by year

FY 1999	34,841
FY 2000	39,846
FY 2001	36,717
FY 2002	47,756

FY 1999-2002 145,374*

* does not equal the sum of yearly totals because of some repeat testing

Conclusion

By any measurable standard, VA has developed and implemented a highly successful program of hepatitis C screening, testing, and counseling. We are very pleased by the high rates of risk factor screening documented by EPRP and EPI. However, it will be important to find ways to sustain this effort over time. The VA's Hepatitis C Resource Center Program is examining ways to make the screening and testing process more effective by incorporating additional information already in the medical record, such as abnormal liver function tests, in the Clinical Reminder System. We are also working to ensure that veterans who have a positive test result are notified in a timely fashion. Although 100% success may never be achieved, VA is making steady and impressive progress toward the goal of identifying every veteran in VA care who is at risk for hepatitis C so that they can receive appropriate counseling, accurate diagnostic testing and prompt evaluation and care if they are infected.

Improving the testing process

Diagnostic testing for hepatitis C is not always straightforward. An antibody test tells if a person was ever exposed to the virus, but a viral PCR [polymerase chain reaction] test is needed to determine whether the individual has ongoing, chronic infection. To further complicate matters, antibody tests are sometime give false positive results, requiring a confirmatory test. Because the sequent of testing can be complicated and may require that multiple tests be performed, some patients in the past have had tests that were incomplete or insufficient to make a decision about further treatment. To improve this situation, an Information Letter (IL10-2002-019) prepared by the Hepatitis C Program Office and released by the Under Secretary in early 2003 outlined recommended testing algorithms to ensure that every test result is meaningful. Furthermore, the Information Letter also recommended systems to ensure that the clinicians who order the tests are notified promptly if the test is positive, so that the veteran can be notified and further evaluation begun. Each facility can adopt the system from among suggested options that is most appropriate for local needs. These changes will help with our ongoing efforts to keep improving the accuracy and efficiency of the testing process.

