

Hepatitis B/C screening, retrieval of patients and regional organization of hepatitis care

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Rijnstate

overview

- Screening project Turkey on the rhine
- Screening project Homa (5 countries)
- Heptember project
- Summary of 5 screening projects Arnhem
- Dutch screening projects in Chinese migrants
- Retrieval of patients
- Conclusions
- Recommendations



Rijnstate

Turkey on the rhine

- Community based, no personal invitation
- Key persons: trained Turkish ambassadors, Imams, Turkish family doctors
- Information material: posters, flyers, video, website
- Tailored information about hepatitis taking care of Turkish values, culture

İçimizden biri Hepatit B taşıyor

Iemand van ons heeft het hepatitis B virus



Çünkü dünyada her 12 kişiden biri
hepatit B taşıyor

Omdat 1 op de 12 mensen hepatitis B heeft

Aşı en etkili ve güvenli korunma şeklidir...
Laat je inenten. Vaccinatie is de enige betrouwbare manier...

Hepatit den
KORKMA
KORUN
Weet u zeker dat u geen hepatitis hebt?!

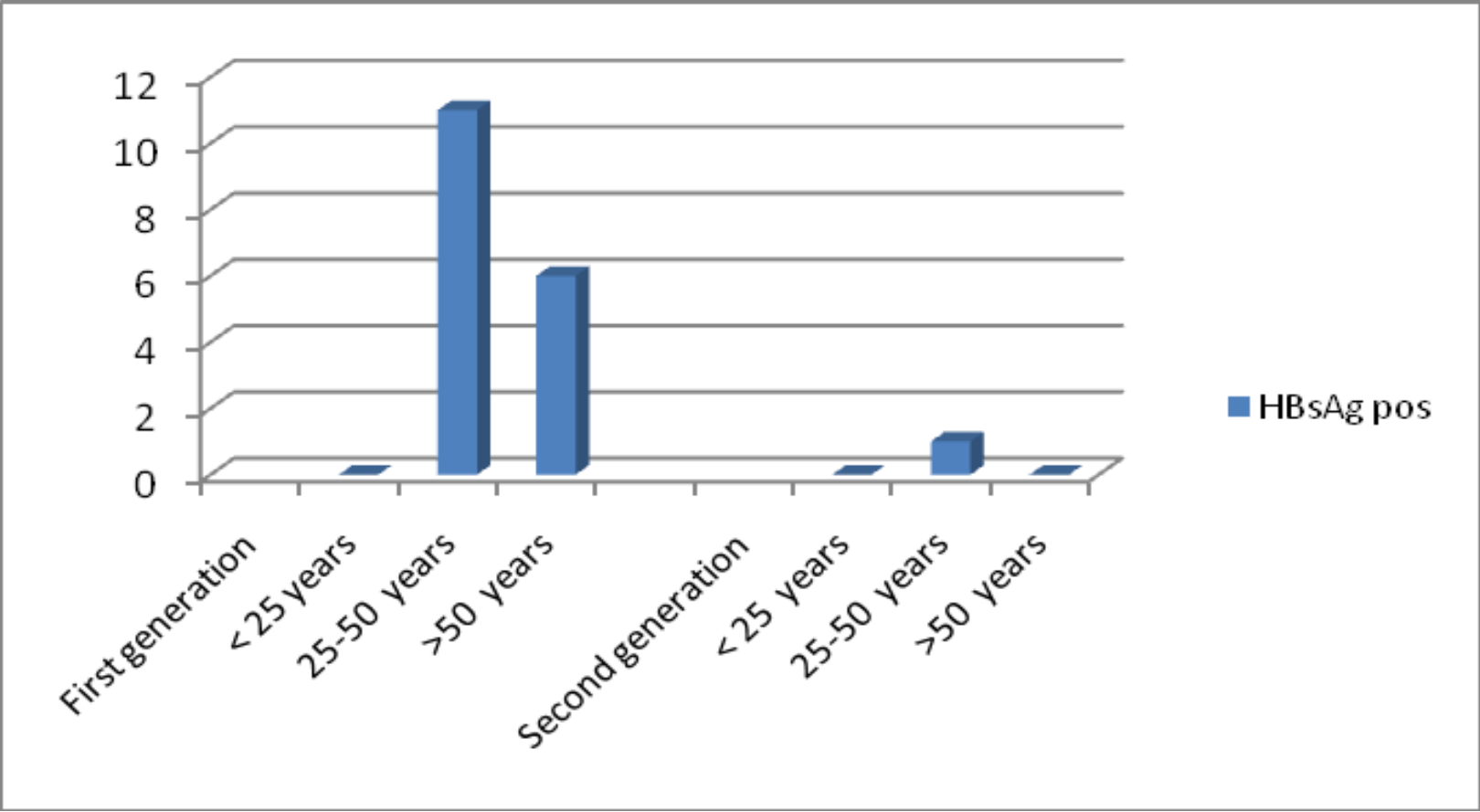
14 information meetings, mainly in Mosques, on-site test



N= 647, participation rate

AGE	Men 1. generation	Men 2.generation	Women 1.generation	Women 2.generation
13-24 y	3.2 %	3.1 %	8.4 %	6.6 %
25-50	9.5 %	3.9 %	14.8 %	6.0 %
>50	15.2 %		20.2 %	

HBsAg positives (18) in relation to generation and age



Summary of results:

HBsAg pos:

- >13 jaar: 16/ 544 = 2.9%
- >24 jaar: 16/ 529 = 3.0%

Anti-HBc pos

- < 25 years: 6.7%
- 25-50 years: 30.2%
- > 50 Years: 57.7%

Anti-HCV and HCV-RNA pos: 2 pat = 0.4%

Liver cirrhosis: 1 pat with hep.C

Screening migrants for chronic hepatitis B and C from Afghanistan, Iran, Irak, the former Sovjet Republics and Vietnam in the Arnhem region, The Netherlands

Richter C et al: *epidemiol.infect.*2014



Target group first generation migrants (FGM) > 17 years

- Irak n= 1020
- Afghanistan n= 804
- “Sovjet countries” n= 567
- Iran n= 489
- Vietnam n= 346

Total n= 3226

Methods

- Obtaining full cooperation of municipal office
- Project group – 25 people
- Preparation phase: flyers, posters, website, video
- Campaigning phase: includes personal invitation
- Informat/screening: 3 locations, on-site free testing
- Clinical evaluation





Participation rate

- Vietnam 36.4%
- Afghanistan 36.4%
- Iran 31.2%
- Iraq 28.4%
- “Sovjet-Republics” 11.4%
- Participation rate increasing with age
- Highest in FGM from Vietnam >50 years: **67.5%**
- higher participation of women

Results: HBsAg pos, anti-HCV pos

	particip.	HBV	HCV
▪ Vietnam	n= 126	9.5%	1.5%
▪ Afghanistan	n= 293	2.0%	1.0%
▪ Irak	n= 190	0.7%	0.3%
▪ Iran	n= 153	0.7%	0.6%
▪ Sovjet-Republics	n= 65	0,0%	3.0%
▪ Total particip.	N= 827		
▪ anti-HCV pos: 9; HCV-RNA pos: 3			

Summary of results

- High HBV prevalence among FGM from Vietnam
- Highest HCV prevalence : FGM Sovjet-Republics
- Among HBsAg pos: 33% HBeAg pos, 48% with HBV-DNA > 2000 IU/ml
- Liver cirrhosis: 1 pat with hep. B, 2 with hep.C



Heptember, awareness month

- in- hospital campaign, entrance hall, all out-patient clinics
- Target group: 5000 hospital workers, out-patients, visitors with risk of HBV/HCV
- Posters, flyers, film (own production; non-stop in entrance hall and all waiting-rooms), web-site
- Mails sent to all 230 med specialists
- Free blood screen for HBsAg, anti-HBc, anti-HCV



hepatitis C **bloedtransfusie** overdraagbaar
besmet **SCHEERMESJES** geboren in een niet-westers land
zonder **onveilige seks** **besmet** hepatitis B
ziek te zijn
piercing **overdraagbaar**
virus
hepatitis B
tatoeage
chronisch
NIET STERIEL
(ex-) druggebruik
leverschade
onveilige seks
tatoeage
PIERCING
LEVERSCHADE geboren in een niet-westers land chronisch
goede medicijnen **besmet** zonder ziek te zijn
niet steriel bloed-bloedcontact **INJECTIENAALD** virus
goede medicijnen

286 participants with full data set

- Women 70.6%
- Born in non-western country 24%
- Contact with blood (instr., needles..) 38.1%
- Blood transfusion before 1992 17,8%
- Unsafe sex 10.1%
- (iv) and base-pipe drug use 0.6%

Bentum P, infectieziekten bulletin, in press



Results of HBV/HCV screen

- HBsAg positive $1/266 = 0.4\%$
- Anti-HCV positive $7/310 = 2.3\%$
- HCV-RNA positive $2/310 = 0.6\%$

Conclusion:

Low number of participants,

Risk groups relatively well reached

Low number of positive tests



Table 1.								
Project	Country	Method*	Participation		HBsAg positive		HCV RNA positive	
	Target group							
			n	%**	n	%	n	%
Turkey on the Rhine								
	Turkey	CB/KP	647	10,2	17	2,6	2	0,3
Homa								
	Afghanistan	PI/CB/KP	293	36,4	6	2,0	1	0,3
	Iran	PI/CB/KP	153	31,2	1	0,7	0	0,0
	Irak	PI/CB/KP	290	28,4	2	0,7	0	0,0
	Former Soviet Republics	PI/CB/KP	65	11,4	0	0,0	1	1,5
	Vietnam	PI/CB/KP	126	36,4	12	9,5	1	0,7
China East Netherlands***								
	China	PI/CB	743	22,4	29	3,9	1	0,1
HCV saliva test (SPEC)****								
	Ex IDU in social care	CB/KP	80	.	.	.	1	1,3
Heptember								
	All	CB	313	.	1	0,3	2	0,6
Total								
			2710		68	2,5	9	0,3

* Method: community based (CB), personal invitation (PI), key persons (KP)

** Percentage of total first-generation migrant population,
source Municipal Database Arnhem/Rheden/Nijmegen

*** Screening was conducted in the city of Arnhem and Nijmegen

**** Dataset not yet complete

HBV screening in Chinese migrants

- 5 commun. based screening projects 2009-2013
- 4423 persons screened
- 264 = 6% HBsAg pos
- 25% started treatment within 1 year
- In total 75% needed treatment or strict follow-up because of high viral load or HCC screen

Veldhuyzen IK, J of Hepatol 2012; Coenen S, EASL O 122,2015

Need for retrieval in Arnhem region

Table 1. No of patients with hepatitis B and C who need to be retrieved

	No of patients with hepatitis B and C	Lost to follow up or need for re-evaluation	%
Department of infectious diseases	242	72	30
General primary care practice	30	10	33
Municipal Health Service	230	64	28

Conclusions

- Screening projects including personal invitations increases participation rate
- High HBV-prevalence among Vietnamese and Chinese migrants
- About 30% of patients with hepatitis B/C get lost to follow-up in hospital care, primary care and municipal health service: retrieval should get high priority

Recommendations

- Screening projects and retrieval should be embedded in close regional collaboration between:
primary care practice, midwives, community health service, addiction care centers, prisons, laboratories, hepatitis specialists in- and outside hospitals
- National hepatitis plan including guideline for hepatitis B/C screening is highly needed

A collage of 20 photographs of diverse individuals, mostly professionals, arranged around the central text "the power of regional collaboration". The photos show people in various settings: some in formal attire, some in casual wear, some in group shots, and some in individual portraits. The text is centered in a large, white, sans-serif font.

Questions?

