Hepatitis C Antibody Screening in a Retail Pharmacy Setting: Local Testing and Linkage to Care via an HCV Management Specialist

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Abstract: Introduction

It is estimated that there are 4.6 million individuals in the US that have been exposed to the hepatitis C virus (HCV) and are antibody positive (AB+). Baby boomers born between 1945 and 1965 have been identified as having higher prevalence of HCV leading to screening recommendations by the Centers for Disease Control and Prevention (CDC). The aim of this study is to identify the prevalence of HCV AB+ using birth cohort and high risk factors in individuals screened at retail pharmacies and to link HCV AB+ individuals with a pathway to care.

Methods

This is an ongoing IRB-approved screening study involving 45 retail pharmacies located in 9 US metropolitan areas. A full time phlebotomist was assigned to each city and he/she screened individuals at a different store within the given city each day of the week. Individuals were recruited by direct advertising at the pharmacies. After obtaining informed consent, demographic data and a risk factor assessment were collected. A finger stick blood sample was screened for HCV antibody (HCV AB) using the OraQuick HCV Rapid Antibody Test. Within 3 business days of testing, HCV AB- individuals were given their results via email or phone. HCV AB+ individuals were contacted by a designated HCV Management Specialist who provided the test results as well as specific information for a pathway to care. The same HCV Management Specialist followed up with all HCV AB+ individuals approximately 21-28 days after initial contact to determine whether the individual followed up with their primary care provider or through the pathway provided by the HCV Management Specialist.

Results

Between September 15, 2015 and November 6, 2015, 502 individuals were screened in 45 Walgreens retail pharmacies throughout the United States. 46 individuals (9.2%) were HCV AB+. The percentage of individuals testing AB+ varied by city with New York City, New York reporting the lowest rate (3.9%) and San Antonio, Texas reporting the highest rate (16.5%) of HCV AB+ individuals. Of the 46 HCV AB+ individuals, 39/46 (85%) were contacted via telephone by an HCV Management Specialist and given their test results. Follow up telephone contacts between the HCV Management Specialist and HCV AB+ individuals to confirm follow up with a healthcare provider for confirmatory testing and evaluation are underway and will be available for presentation.

Discussion

The overall prevalence with pharmacy customers was higher than predicted with 9.2% (46/502) individuals testing HCV AB+; however, there still remain barriers to care for infected individuals even with the assistance of a dedicated HCV Management Specialist.