

Outcomes of hep C screening intervention examined

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A multicomponent intervention can improve hepatitis C virus (HCV)

screening, although there is considerable variation by practice, according to a study published online Dec. 3 in the *Annals of Internal Medicine*.

Barbara J. Turner, M.D., from the University of Texas Health Science Center at San Antonio, and colleagues examined the process and outcomes of the Screen, Treat, Or Prevent Hepatocellular Carcinoma (STOP HCC) intervention for HCV [screening](#) and care. Data were included for individuals born in 1945 to 1965 who had never been tested for HCV and were enrolled at five federally qualified health centers (FQHCs) and one family medicine residency program.

The researchers found that 13,334 of 27,700 individuals underwent anti-HCV screening (48.1 percent, varying from 19.8 to 71.3 percent by practice). HCV RNA was tested in 74.8 percent of 695 anti-HCV-positive patients (48.9 to 92.9 percent by practice); 2.6 percent of those screened were diagnosed with chronic HCV. A total of 84.9 percent of 205 uninsured patients with chronic HCV had disease staging in four FQHCs, 70.7 percent had teleconsultation review, 58.0 percent were advised to start direct-acting antiviral (DAA) treatment, 40.0 percent initiated free DAA therapy, and 36.1 percent completed therapy. Of the DAA completers, 94.6 percent achieved sustained virologic response.

"Screening for HCV was virtually nonexistent before STOP HCC and increased afterward to 48 percent of 27,700 eligible baby boomers over a period of 29 to 43 months through May 2018," the authors write.

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