Thomas Jefferson **Jniversity**

HOME OF SIDNEY KIMMEL MEDICAL COLLEGE



Background

- When care is delivered in a person-centered, non-stigmatizing environment, hospitalization for acute medical disease represents an opportunity to initiate substance use treatment and infectious disease screening for people who use drugs.
- Since 1996, the U.S. Centers for Disease Control and Prevention has recommended hepatitis A vaccination for persons who use injection and non-injection drugs.
- Hepatitis B vaccination is recommended for all unvaccinated adults at risk for infection including persons with a history of current or recent injection drug use.
- Regardless of age or setting prevalence, all persons with risk factors should be tested for hepatitis C, with routine periodic testing while risk factors persist.
- Treating people who use drugs can reduce transmission of hepatitis C and provide community-level prevention for new infections.

Health Equity

• Focused on providing high quality care for a predominantly unstably housed urban population and sought to address barriers to quality care in a highly stigmatized group.

Methods

- Retrospective, pre-post quality improvement • Addiction consult initiated infectious disease screening panel including viral hepatitis labs.
- Study group: All patients who received an addiction medicine consult at a large, urban, academic hospital in Philadelphia, PA.
- **Time frame:** Pre/post comparison from Feb 1, 2023 Nov 30, 2023 (pre), to Feb 1, 2024 - Nov 30, 2024 (post).
- Preliminary measures: Pre/Post comparison
 - Hepatitis A total antibody;
 - Hepatitis B triple screen (surface antigen, surface antibody, core lgG antibody);
 - HCV Ab reflex to PCR.
- Outcomes: Percentage of eligible patients
 - Number of patients receiving at least one vaccination to prevent hepatitis A and/or hepatitis B;
 - Number of patients started on direct-acting antiviral for Ο treatment of chronic hepatitis C when appropriate.

Enhancing Viral Hepatitis Harm Reduction through a **Comprehensive Addiction Consult Service**

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- during hospitalization, but:
- Ο
- C infection:

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Conclusions

Statistically significantly increase in preliminary measures:

Screening for hepatitis A and B vaccine eligibility;

Screening for hepatitis C treatment eligibility.

Hepatitis A and/or hepatitis B vaccines not previously a priority

Represents an important opportunity to prevent harm for people who use drugs;

Aligns with the standard vaccine recommendations.

Developed an opportunistic test-and-treat approach to hepatitis

Ongoing care available in new outpatient Bridge clinic;

Direct-acting antiviral treatment prescribed to specialty pharmacy and delivered to the hospital;

Ordered as a "patient own" home medication;

Patient starts treatment during hospitalization;

Leaves with remaining medication on discharge.

Further assessment of hepatitis C treatment cascade of care needed to evaluate the efficacy of this approach.

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