

## Background

- With the world's attention focused on the ongoing corona virus pandemic, a recent public health policy update has received comparatively little attention.
- In March 2020, the USPSTF and the CDC recommended that all adults above age 18 should be screened at least once for HCV infection.
- In 2012, the USPSTF issued screening guidance that recommended age-based screening to all adults born between 1945-1965 (Baby Boomers).
- With the epidemic of injection drug use came an associated rise in HCV cases.
- An estimated 2.4 million people in the United States were living with Hep C during 2013-2016.
- In 2018, an estimated 50,300 acute Hepatitis C cases were recorded.
- Iceland, Australia and Egypt have made tremendous strides in reducing the burden of HCV in their respective populations by introducing widespread access to DAA (direct-acting antiviral) agents.

## Purpose

- Our research set out to illustrate the performance of Mountainside Family Residency in applying the new USPSTF and CDC guidelines for HCV screening.

## Hypothesis

- VFP is screening every adult age 18 and above for Hep C antibody at least once during their annual physical exam visits and is complying 100% with USPSTF guidelines.

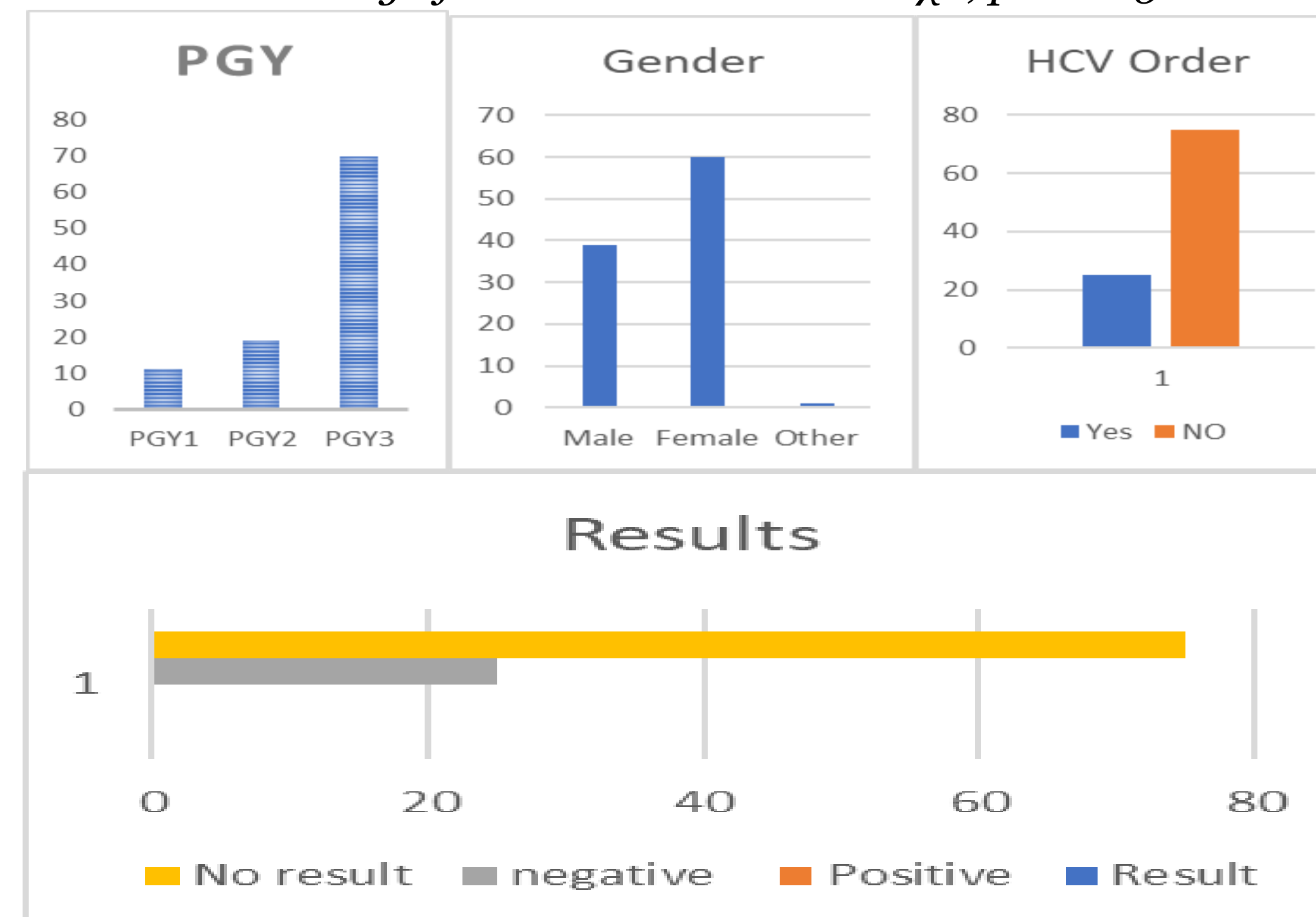
## Methods

- Our data was obtained from the Mountainside Family Practice electronic medical records.
- We used a retrospective study design to analyze records of 1,240 patients with annual visits conducted between April 1, 2020 and September 15, 2021.
- 100 patients were randomly selected by random number generator and checked for the HCV screening.

## Results

	N	$\chi^2$
<b>Gender</b>		48.05
Male	39	
Female	60	
Other	1	
<b>HCV Collected</b>		25
Yes	25	
No	75	
<b>Result</b>		88.394
Positive	0	
Negative	25	
No result	75	

Table 1. Summary of the research results &  $\chi^2$ ,  $p < 0.05$



Graph 1. PGY level, Graph 2. Patient gender, Graph 3. HCV order and Graph 4 Results.

## Discussion

- For the age of the patient, the random sample included patients from the ages of 18 to 86 with a mean of 46.9.
- The gender of the patients was as follows: 60 females, 39 males, and 1 other.
- The level of the resident who conducted the visit is as follows: 11 were PGY 1, 19 were PGY 2, and 70 were PGY 3.
- The HCV screening was ordered and collected in 25 out of the 100 patients randomly selected.
- Of those, the HCV screening result was negative for 25 patients and positive for 0 patients.
- Future researcher should replicate the study with a larger sample.

## Conclusion

- Increasing rates of acute Hepatitis C among young adults, including reproductive-aged persons, have put multiple generations at risk for chronic Hepatitis C. Our family practice residency program need to implementing new strategies to fulfill the USPSTF and CDC 2020 guidelines, including posting informational flyers and updating the EMR system to display a warning sign when testing is needed among other recommendations may improve screening rates.

## References

- Screening for Hepatitis C Virus: How universal is universal, Clin Ther, Published online July 23, 2020.
- Flamm SL, Parker RA, Chopra S. Risk factors associated with chronic hepatitis C virus infection: limited frequency of an unidentified source of transmission. Am J Gastroenterol 1998;93:597-600
- <https://www.cdc.gov/hepatitis/hcv/hcvfaq.htm>