Collaborative nursing models for people living with HIV and Hepatitis C co-infection

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Why the need?
Sussex Operational Delivery Network (ODN)
Local population
Issues identified

Unclear roles and responsibilities

Uncertain identification of those eligible for Direct Acting Antivirals (DAAs)

Co-ordination of complex cases

Communication and clarification of Antiretroviral (ARVs) switches
Outcome 1. Patient pathway

- >6 Months HCV diagnosis
- Assessed by CNS
- MDT approval for DAA
- HIV review for ARV switch

**NO SWITCH**
To start DAA 2 weeks later

**PRE- SWITCH**
To see HIV Pharmacist

**POST- SWITCH**
At end of DAA to review ARV
**Outcome 2. Communication tool**

**Situation:**
Patient details
Presenting problem

**Background:**
Week of HCV treatment and which DAA ARVs
Fibrosis stage
Bloods
Clinical signs and symptoms
Relevant social background

**Assessment:**
What you think the problem could be
What have you done so far

**Recommendation:**
What do you want your colleague to do?
What specific question do you want answered?
Outcome 3. Weekly Multidisciplinary Team meeting (MDT)
Outcome 4. Registry and testing guidelines

**HIV POSITIVE**
- **CELIBATE OR LOW RISK**
  - HCV Ab
  - Baseline: Do not repeat unless new risk identified

- **ONE OFF HIGH RISK**
  - HCV Ag
  - HCV Ag > 4/52 post risk

- **ONGOING HIGH RISK**
  - HCV Ab/Ag
  - HCV Ag 3-4x/year w/ STI Screen

**Cleared Hep C***
- **No new RISK**
  - If HCV RNA neg 12/52 post treatment
  - NO FURTHER ACTION

- **ONGOING HIGH RISK**
  - HCV Ag > 4/52 post risk
  - HCV Ag 3-4x/year w/ STI Screen
**Outcome 5. Baseline assessment**

**PHQ-4**

*Over the last 2 weeks, how often have you been bothered by the following problems?*

*(Use "✓" to indicate your answer)*

<table>
<thead>
<tr>
<th></th>
<th>Not at all</th>
<th>Several days</th>
<th>More than half the days</th>
<th>Nearly every day</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Feeling nervous, anxious or on edge</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2. Not being able to stop or control worrying</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>3. Little interest or pleasure in doing things</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>4. Feeling down, depressed, or hopeless</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

*(For office coding: Total Score $T = ___ + ___ + ___)*
Where we are now

February 2016-June 2018

- Treated with DAA: 59
- Currently on DAA: 4
- Required ARV switch: 41
- Experienced negative mental health problems: 6
- Attempted suicide (due to negative mental health): 2
- Awaiting/unsuitable for DAA: 20
Discussion
The future
Thank you

And to the HIV/Hepatology teams in Brighton, Dr Sumita Verma and Dr Yvonne Gilleece