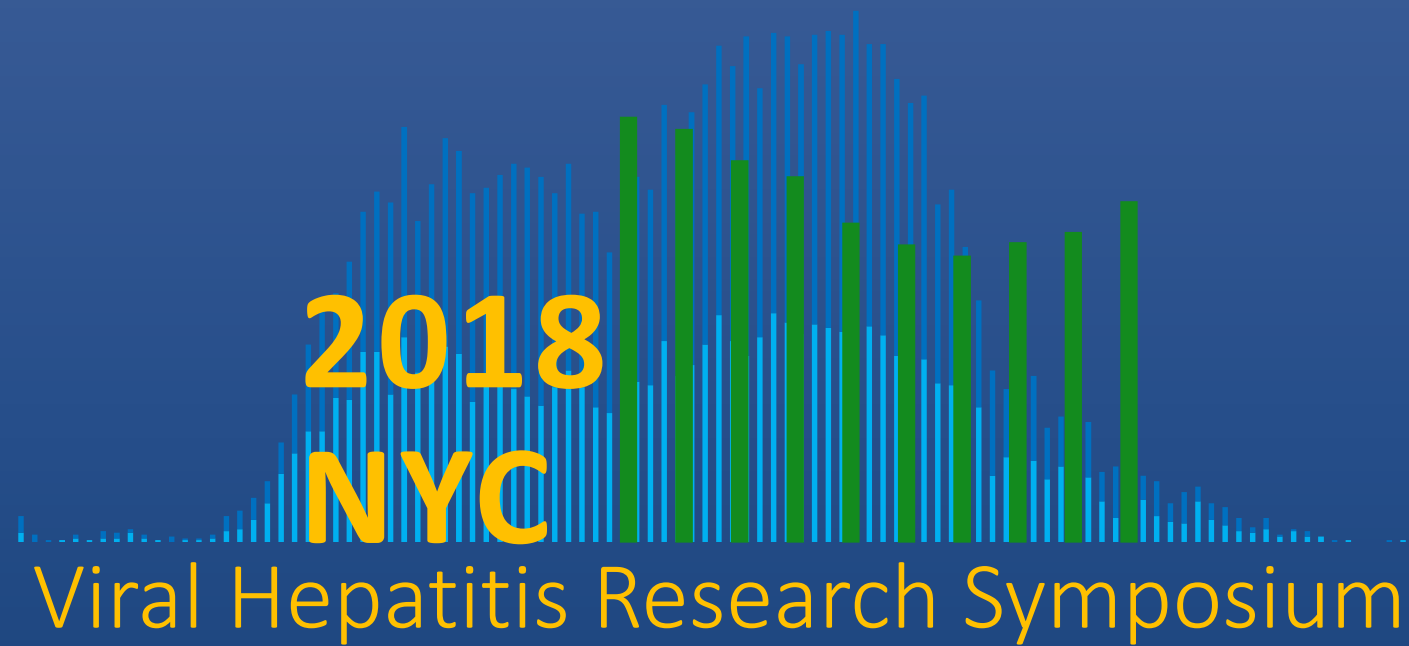




2018

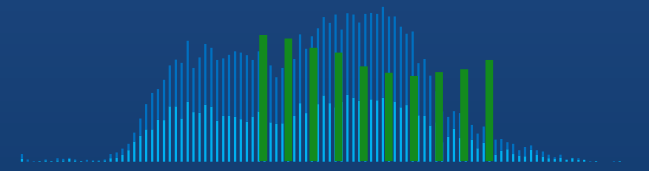
NYC

Viral Hepatitis Research Symposium

Reflex HCV Testing: Implementation and Impact

D. Yitz Goldstein, Montefiore Medical Center

2018
NYC



Viral Hepatitis Research Symposium

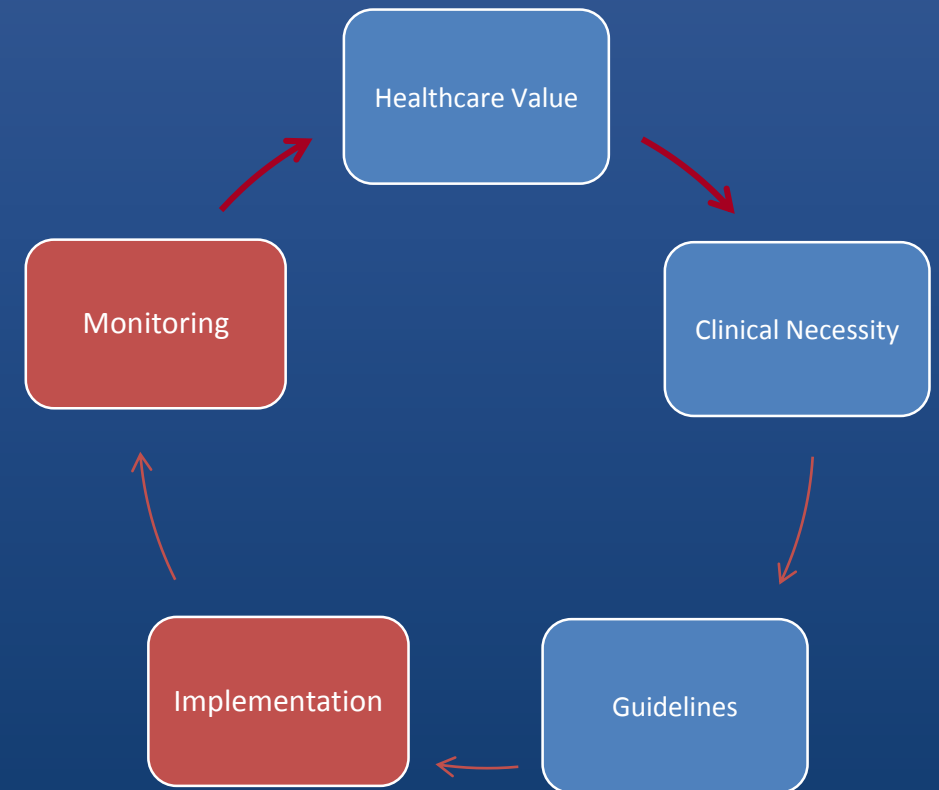
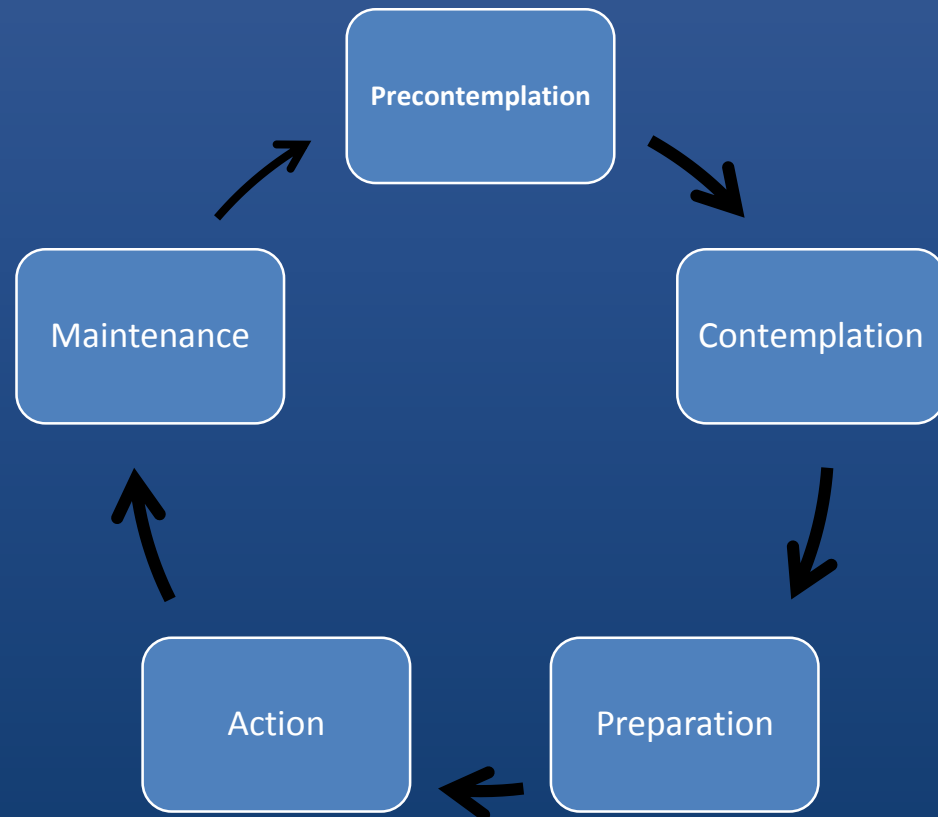
Disclosure

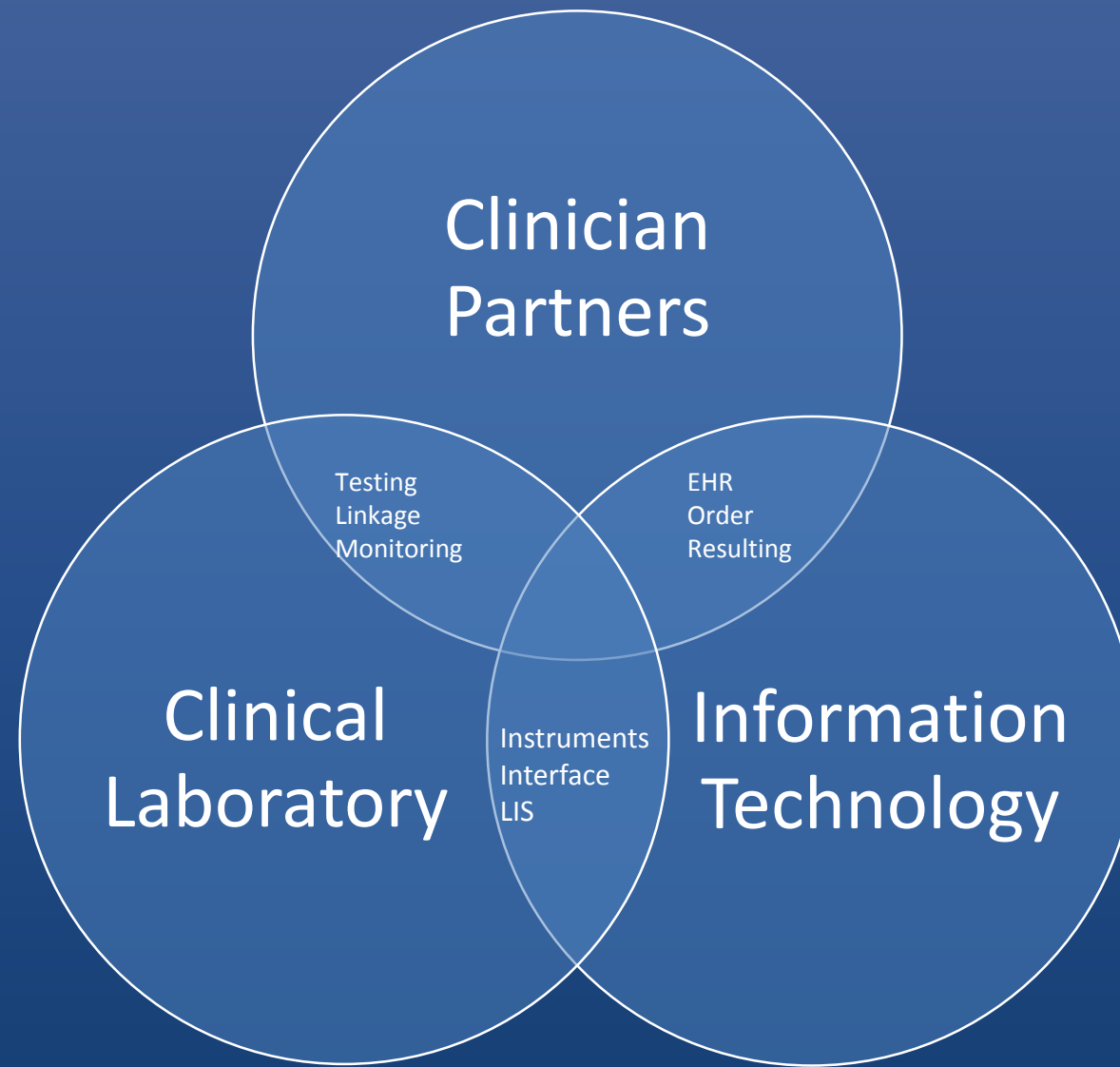
- Nothing to disclose

Brief Outline

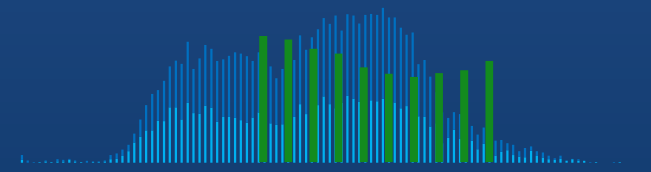
- Implementation Plan
- Assessment Tool
- Outcomes Data

Modified Transtheoretical Model





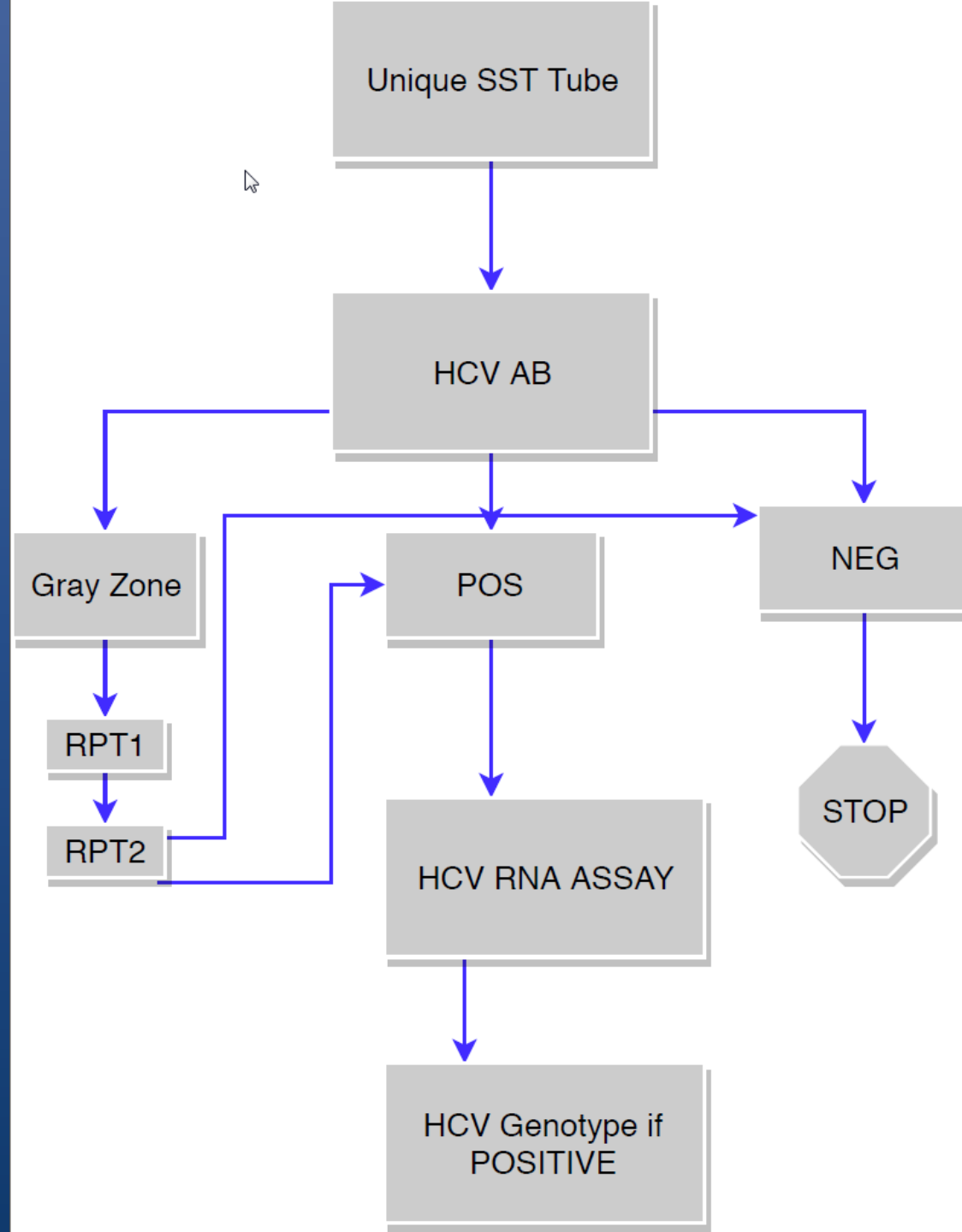
2018
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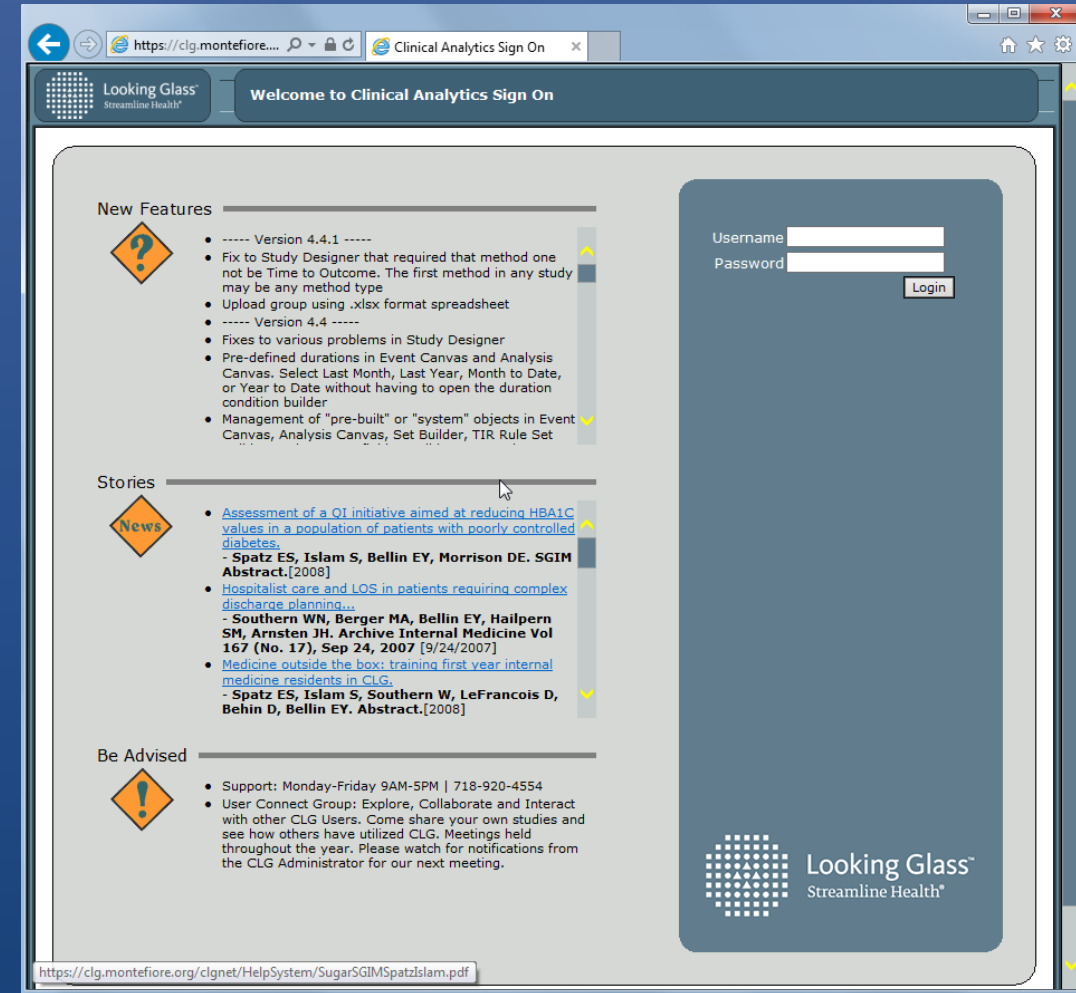
Montefiore Medical Center

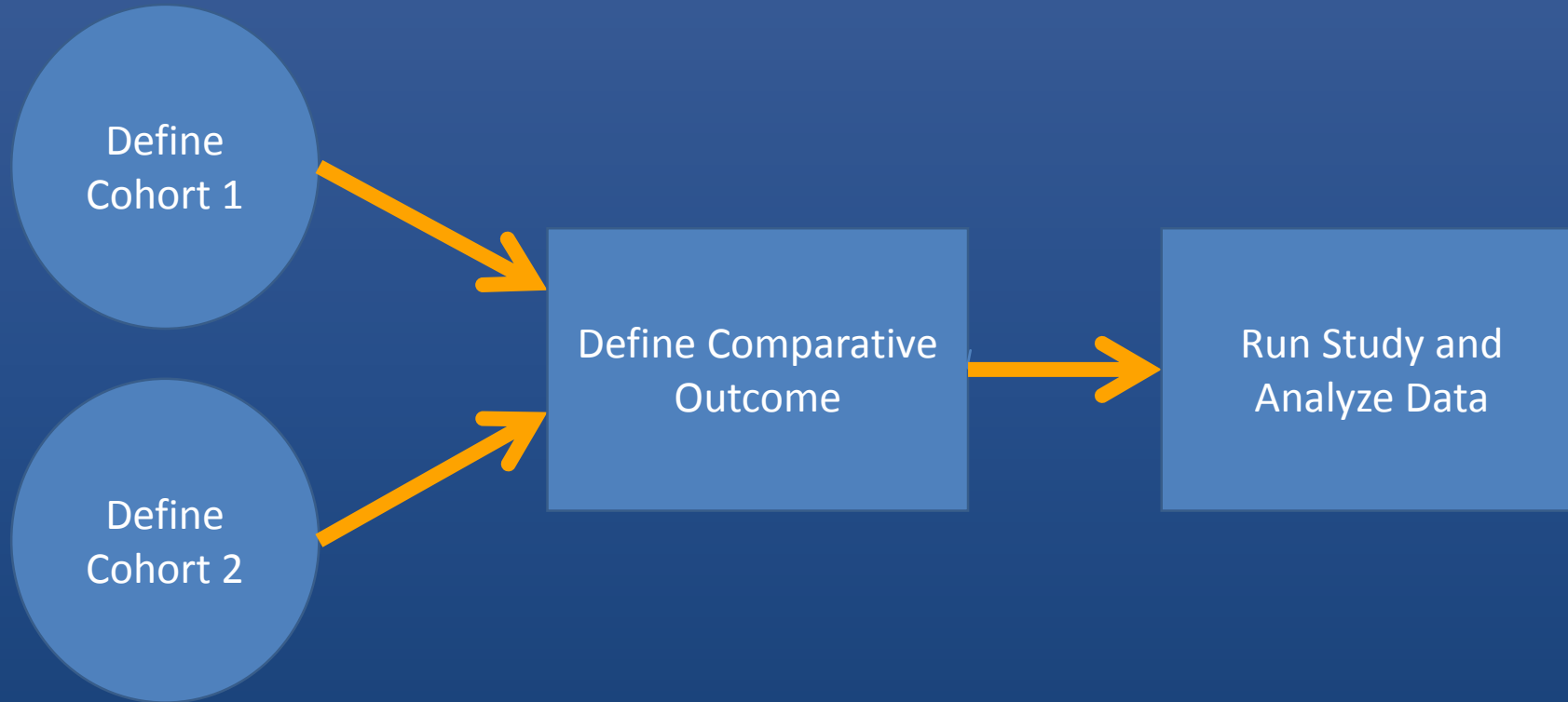
- 1,491 beds at 4 main hospitals
- 93,000 Annual hospital admissions
- Serve diverse urban community in the Bronx
- Performed >65,000 HCV Ab Screens in 2017
- Went live with reflex testing in 2015



Assessment Tool

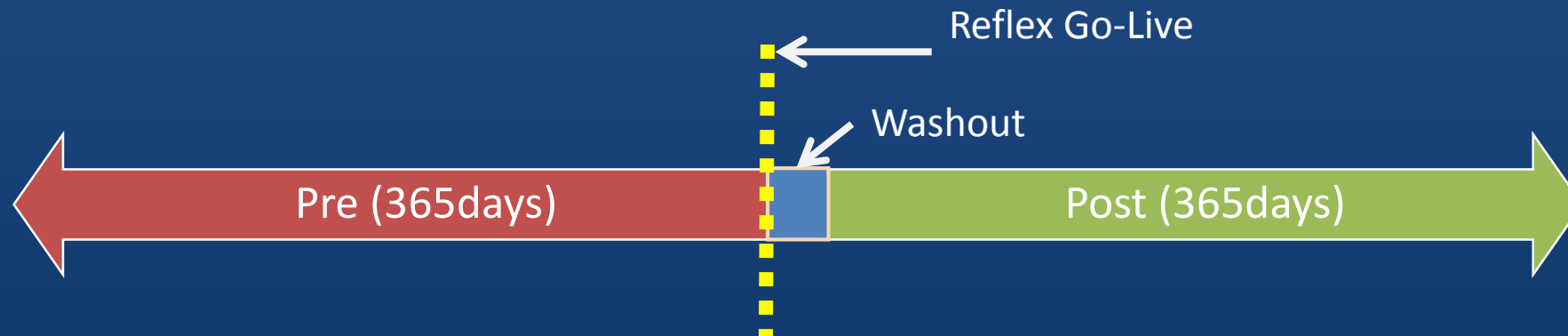
- Clinical Looking Glass
 - Redundant anonymized database of EHR data
 - Queryable through GUI interface
 - Incorporates clinical, laboratory, demographic and other coded information





Study Design

- Identify new HCV diagnoses before and after algorithmic testing
 - HCV AB+
 - HCV VL+
 - No Previous VL positivity
- One Month Washout



Edit Selected

BUILD

☐ Save As

☐ Is System Object



Name: HCV Screen FU VL POS PRE



Event Canvas

[-] C [B] INDEX EVENT : [Earliest of Any (And)]



HCV Screen POSITIVE: [All of [Screen : LabTestDate] WHEN IN [PRE ALGO] WITH [ADULT]]

AND



FU VL Pos: [Earliest of [HCV VL POS : LabTestDate] within 0 to 365 Days After Event: HCV Screen POSITIVE]

AND



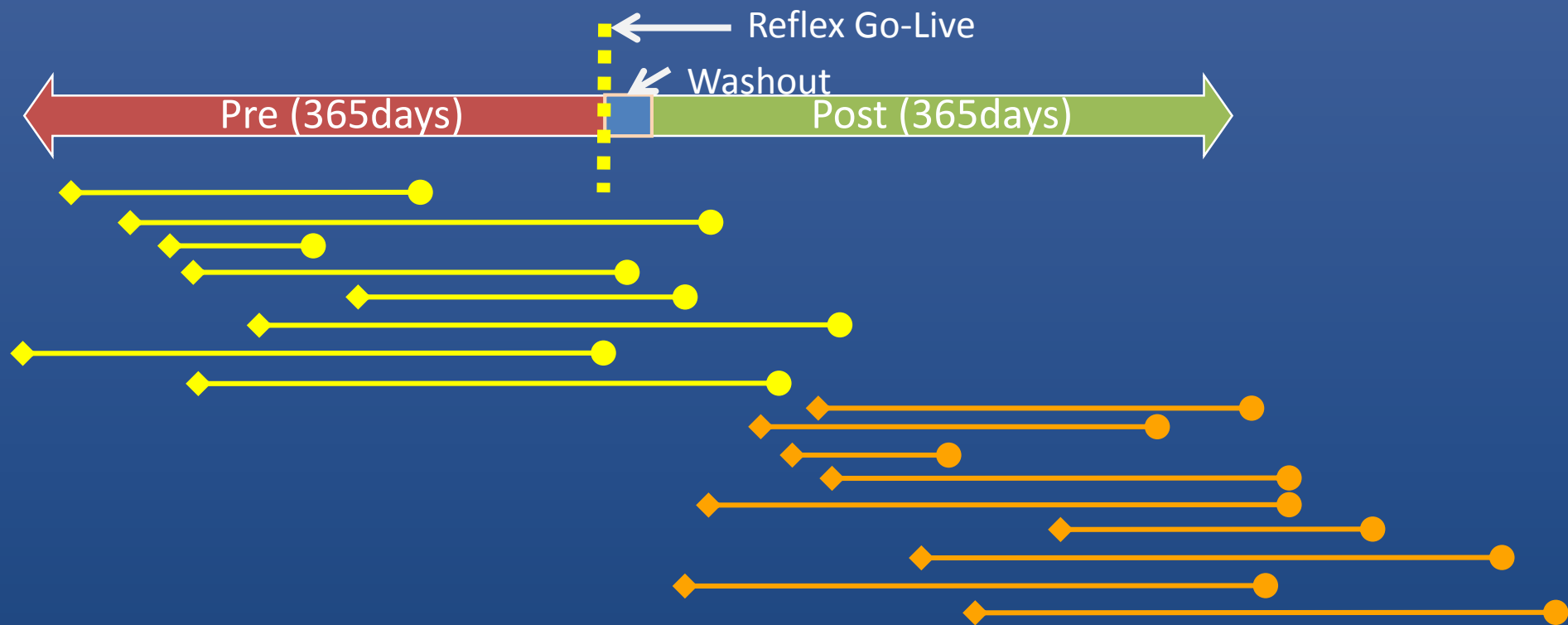
No Prev VL+: [NOT All of [Copy : HCV VL POSCe826 : LabTestDate] within 7 to 10000 Days Before Event: HCV Screen1564]

Cohorts

	Yr Pre-Reflex	Yr Post-Reflex
Screen +	1,262	1,451
-Male	748	861
-Female	514	590
Confirmed NEW+	466	650
-Male	287	431
-Female	179	219

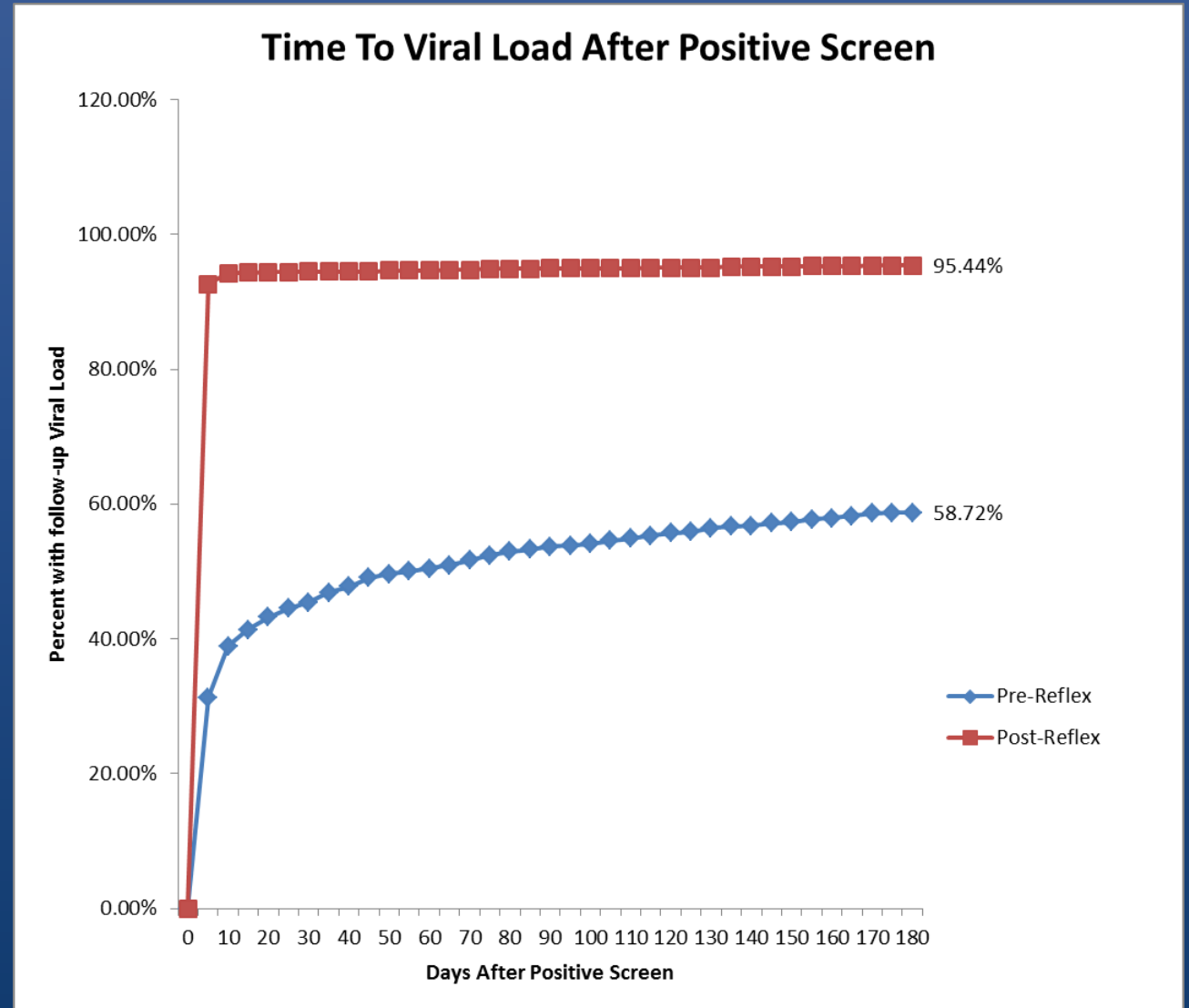
Building Study Endpoint Questions

- Was reflex testing being performed as planned?
- Were results having any meaningful impact?
 - Were patients being followed up with clinicians?
 - Were there any improved outcomes?



Was Testing Being Reflexed?

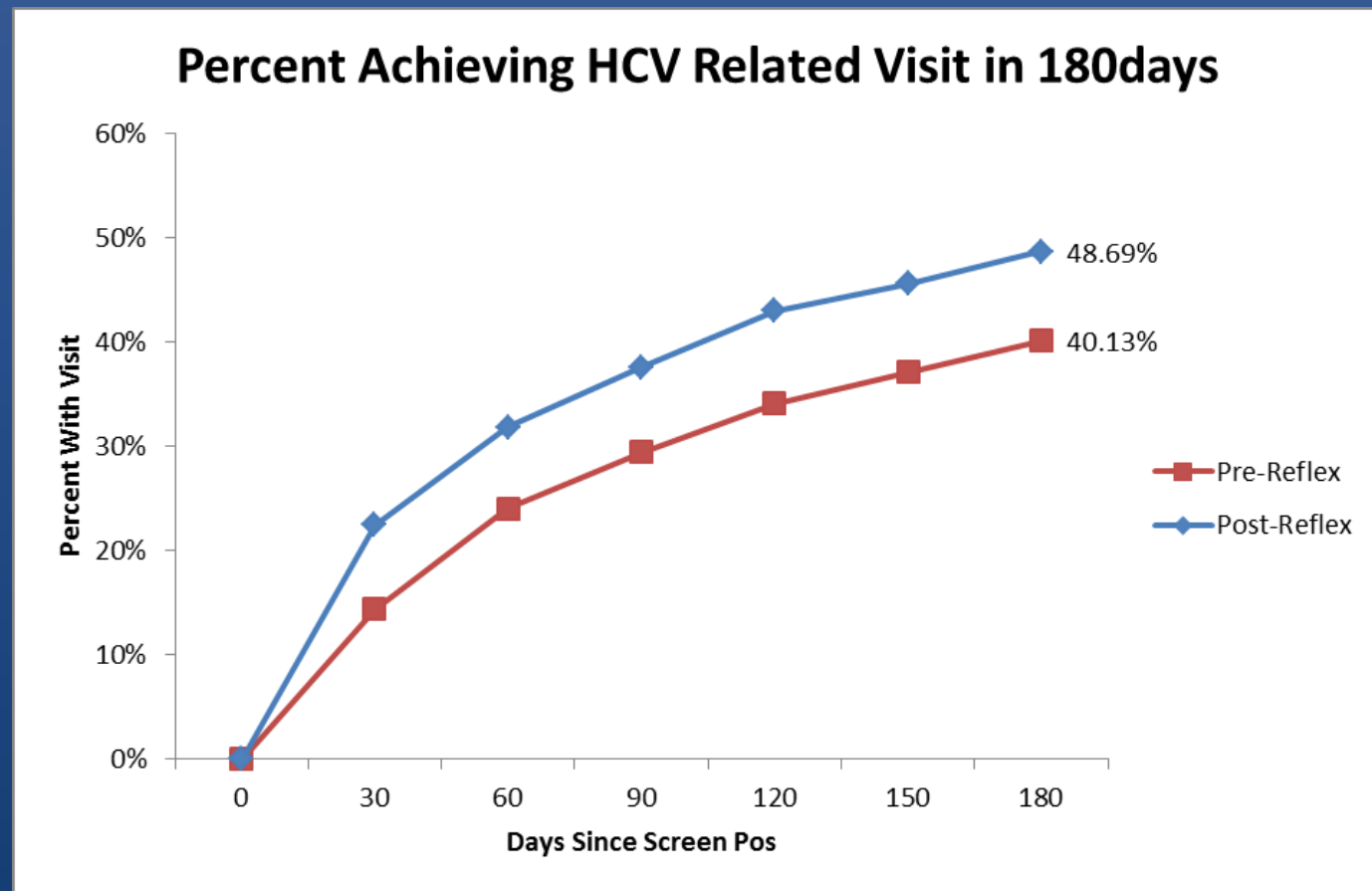
	Yr Pre-Reflex	Yr Post-Reflex	(p)
% without VL within 180days	41.3%	4.6%	<0.0001



Patient Visits

- Software searched prospectively from Screen+ date looking for HCV ICD related outpatient event

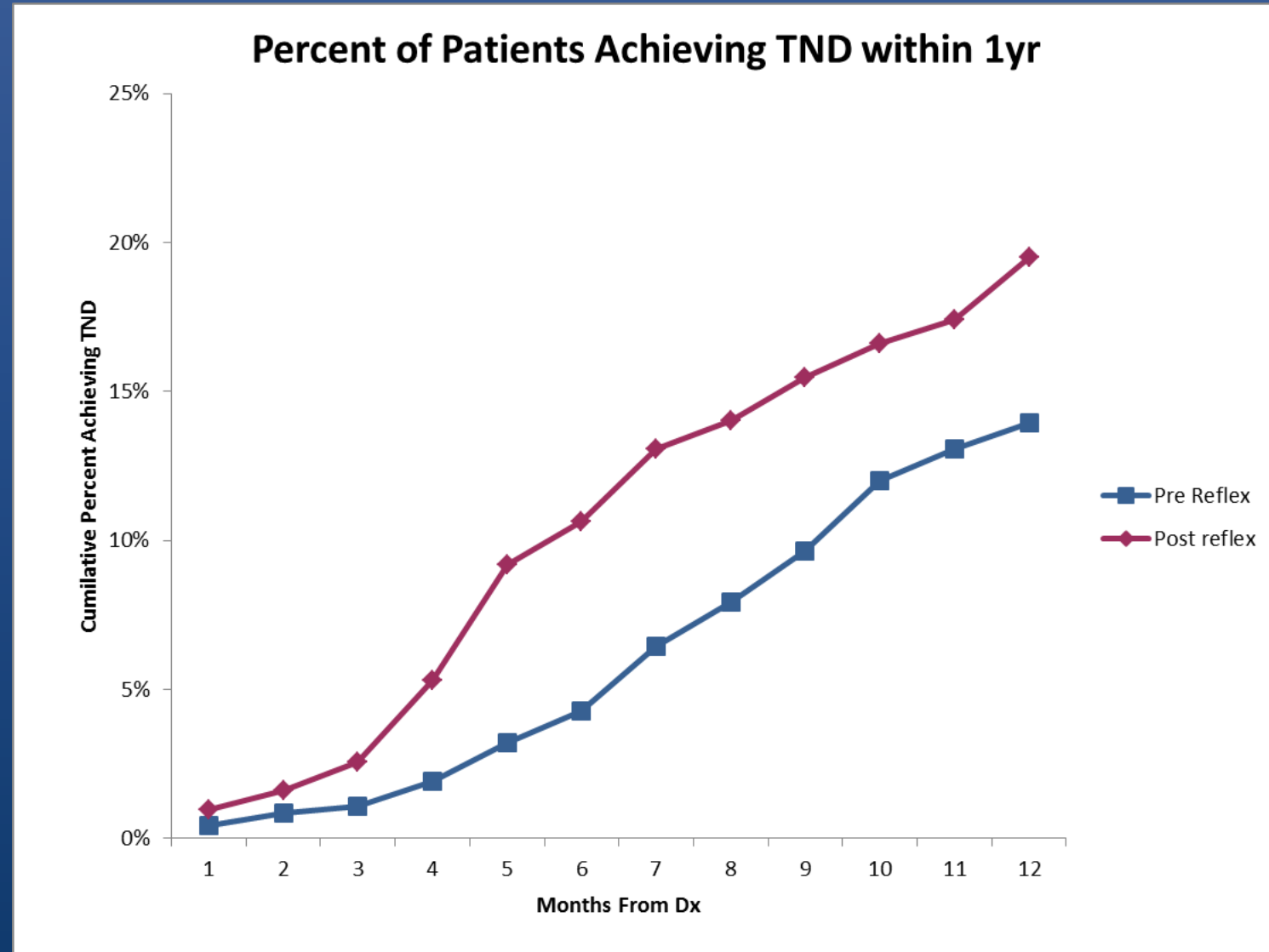
	Yr Pre-Reflex	Yr Post-Reflex	(p)
% With HCV Related Clinical Appointment in 180 days	40.1%	48.7%	0.001



Time-To Undetectable VL

- Search same cohorts for laboratory undetectable VL following new HCV diagnosis.

	Yr Pre-Reflex	Yr Post-Reflex	(p)
% Achieving TND in 1yr	13.9%	19.5%	0.01



Summary

- NYC requires RNA testing in HCV Ab+ patients
- Success rates of RNA follow up are greatest amongst institutions who have implemented reflex testing.
- Systems change can be complex; Clinical stakeholders are key
- Improvements in patient outcomes (time to clinical visit, time to undetectable VL) may be seen following reflex testing implementation



Department of Health and Mental Hygiene

Board of Health

Notice of Adoption of Amendment
to Article 13 of the New York City Health Code

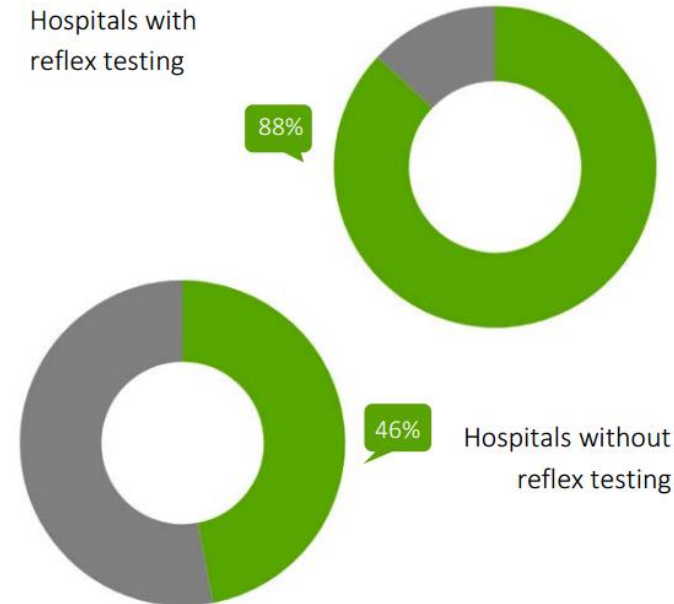
In compliance with §1043(b) of the New York City Charter (the "Charter") and pursuant to the authority granted to the Board of Health (the "Board") by § 558 of said Charter, a notice of intention to amend Article 13 of the New York City Health Code (the "Health Code") was published in the City Record on June 22, 2017 and a public hearing was held on July 27, 2017. Three witnesses testified at the hearing and seven written comments were received. No changes were made to the original proposal. At its meeting on September 12, 2017, the Board adopted the following resolution.

Statement of Basis and Purpose

Pursuant to New York Public Health Law Section 580(3), the City has the authority to regulate clinical laboratories. The Department's Division of Disease Control enforces Article 13 of the Health Code, which requires that laboratories report how laboratory tests must be

Figure 1

Rates of HCV RNA testing at HepCX hospitals, 2016



ance and control of hepatitis C,

y)(3) to require laboratories to test if an antibody test is positive and on the same specimen or a 1 specimen. This requirement led with HCV are aware of their cured, thus reducing the risk of

r test, which shows whether the ositive, a confirmatory RNA test ad with the virus. If the provider antibody test, the patient must i-step testing process results in

ing antibody positive who were ed on the same specimen; and tients newly reported as HCV all. A 2016 Department survey atically order confirmatory RNA

All positive HCV antibody test results and HCV RNA positive and negative test results are reported to the Health Department.

Thank You!

- Dr. Amy Fox
- Dr. Jonathan Schwartz
- Dr. Alain Litwin
- Dr. Matthew Akiyama
- Dr. Eran Bellin
- NYC DOH