

# Challenges in Hepatitis B Treatment and Management: The nursing perspective

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# Overview

- Clinic context
- 3 cases
  - Priority attached to hospital-based care
  - Lack of priority given to hepatitis B
  - Disappearing act

# Clinic context

- Community health centre situated in inner east of Melbourne
  - 10<sup>th</sup> highest CHB prevalence area in Australia
- Patient demographic data 2014 (n=4,500):
  - Country of birth – Australia, Greece, Ethiopia, China, Viet Nam, Somalia, Italy and Sudan

# GS

- 43 year old, Ethiopian-born female
  - Migrated to Australia from Ethiopia in 2004
- Social history
  - Married
  - 4 children (19, 9, 6 and 3 years old)
    - 3 of 4 children born in Australia
  - Currently unemployed

# GS

- Possible transmission routes
  - Born in Ethiopia
    - No family history of liver disease
  - Multiple vaccinations in Ethiopia
  - 1994 (age 21) episode of jaundice – no diagnosis
- 1st diagnosed with hepatitis B in 2007 during antenatal screening
  - Repeatedly “diagnosed” during pregnancy
  - Referred to tertiary hospital in 2010

# GS

- At referral (2010):
  - HBsAg+, anti-HBc+, HBeAg-, anti-HBe+
  - ALT 21
  - HBV DNA 127

# GS

- December 2012
  - HBV DNA 39 IU/ml
- May 2013
  - 98 IU/ml
- **August 2013**
  - **HBV DNA 10,200 IU/ml; ALT 228-343 U/L**
- September 2013
  - HBV DNA <20 IU/ml

# GS

- Review 6-12 monthly review at hospital since
  - HBV DNA <20 IU/ml
- 12 monthly liver ultrasounds
  - Diagnosed with fatty liver
- FibroScan 3.8kPa
- ALT within normal range (<19U/L)



# GS

- Appointment with GS in August 2015 (very worried about who was in the waiting room and might see her meet with me)
  - Explored her hepatitis B knowledge
    - Very low; unsure of how she contracted hep B; seems to be a “problem” when she gives birth
  - Regularly attends the hospital appointments
    - “Not sure why ... something in my tummy”
  - Considered enrolling her shared care program
    - “it must be important if I have to go to hospital”

# GS

- Ongoing approach
  - Working with GS to improve her understanding of hepatitis B
  - Maintain the delivery of care through the tertiary hospital
    - Easy to get to by tram
    - Knows where to go in the hospital
    - Appointment day/time suits her

# EF

- 28 year old Sudanese female
  - Arrived in Australia in 2007
- 4 children (12, 10, 8 and 3 years)
  - 2 of 4 children born in Australia
- Appointment in March 2016
  - EF wanted to learn more about hepatitis B
  - Pre-pregnancy testing – January 2016
    - HBsAg+, anti-HBc+, HBeAg negative, anti-Hbe+; HBV DNA <20; ALT 41

# EF

- During the discussion:
  - Her new partner is very unwell in hospital
  - Diagnosed with AIDS
  - EF very distressed as she was not aware
  - Underwent HIV testing – subsequently negative
- Developed severe anxiety, depression
  - Presented to the clinic 5 times in 3 weeks
  - Collapsed in public setting due to exhaustion from stress
  - Mental Health Care plan developed

# EF

- Hepatitis B is not a priority
  - In regular contact with health professionals BUT regular monitoring has not occurred
    - Working with the GPs to understand importance of monitoring
  - Talking about hepatitis B “stresses her out”, she prefers to avoid it
  - Expressed feeling stigmatised because of hepatitis B
    - Worried about who is in the waiting room

# AD

- 22 year old Sudanese male
  - Recently migrated to Australia
  - No family in Melbourne
- Presented in October 2015 to GP for a health check (case worker request)
  - HBsAg+, anti-HBc+, ALT 32
    - Unaware of HBeAg/Ab status (GP did not order)

# AD

- AD returned in November 2015 for results
  - GP and I had a discussion about results and developed a management plan
- GP appointment
  - AD not aware of any family history of hep B or liver disease
  - Currently drinking a lot of alcohol
  - Having unprotected sex with his girlfriend – unaware of her hep B status
  - GP explained the need for ongoing monitoring and HCC surveillance

# AD

- In the last 10 months
  - Recall letters have been sent to his address
  - Phone calls and SMS reminders to make an appointment
  - Actions inserted into medical history





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Caring - Achieving  
the Extraordinary

