

Background

- 2.4 million Americans living with Hepatitis C virus infection¹
- Direct-acting antiviral (DAA) agents are preferred treatment but there are many barriers to DAA treatment²⁻⁴
 - Cost
 - Health plan/payer restrictions
 - Lack of patient access
 - Patients lost to follow up
- Specialty pharmacists and pharmacy technicians are uniquely trained to assist in mitigation of DAA treatment barriers
- St. Elizabeth Healthcare's Specialty Pharmacy and Medication Management Clinic (MMC) work together for patients referred for hepatitis C treatment
- Studies suggest typical SVR rate in practice is approximately 86-95% and completion rate is approximately 92-94%⁵⁻⁷

Objective

Determine if the combination of a pharmacist-managed clinic with a specialty pharmacy improves the treatment cure rate of patients with hepatitis C compared to other studies

Study Design

- Retrospective observational study
- Time frame: October 1st, 2018 – September 30th, 2021

Methods

Primary Outcome:

- Identify the percentage of patients referred to the pharmacist-run hepatitis C clinic with sustained virologic response (SVR)

Secondary Outcomes:

- Evaluate the percentage of patients who completed hepatitis C treatment
- Determine the percentage of patients who obtained SVR labs

Inclusion Criteria:

- ≥18 years, diagnosed with hepatitis C infection, and referred to the hepatitis C clinic by a gastroenterologist or infectious disease practitioner who has signed a collaborative care agreement.

Exclusion Criteria:

- < 18 years old
- No referral to hepatitis C clinic

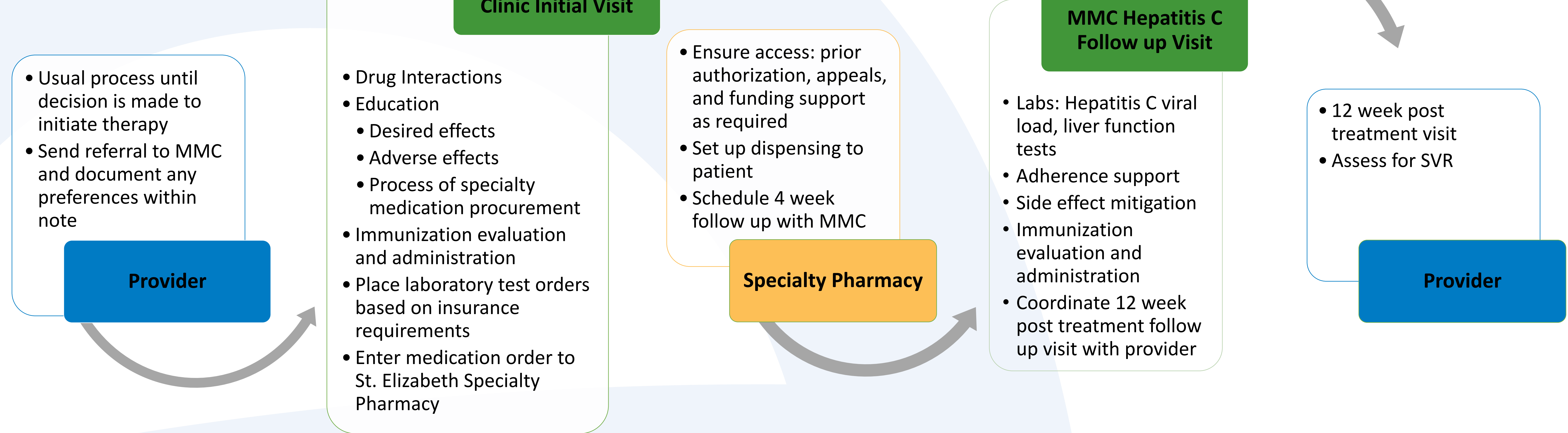
Data Analysis:

- Data was summarized using descriptive statistics

Interventions:

- Patients were followed by St. Elizabeth Medication Management Clinic and Specialty Pharmacy as seen in Figure 1

Figure 1: Hepatitis C Referral Process



Results

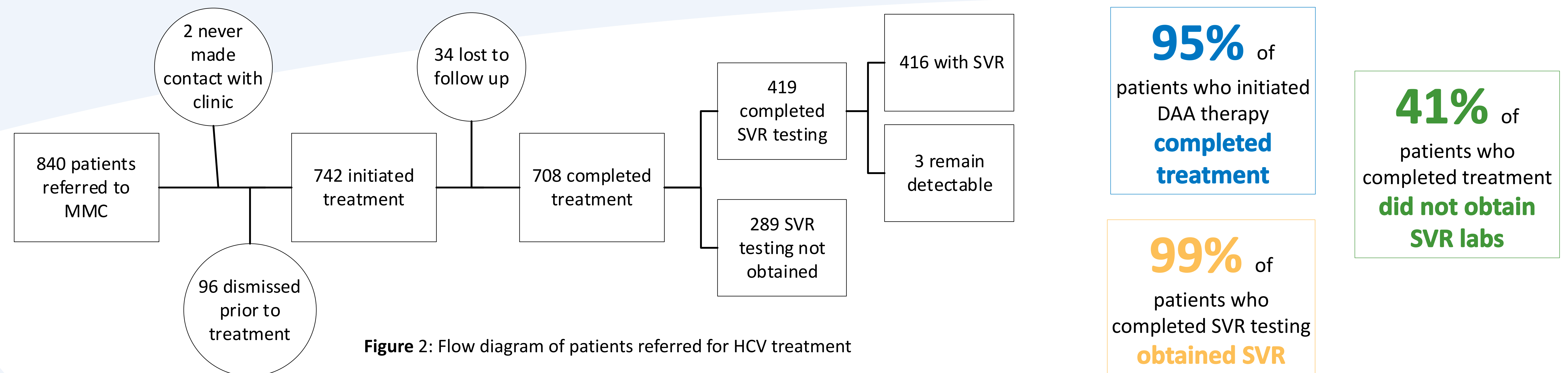


Figure 2: Flow diagram of patients referred for HCV treatment

Conclusions

- A pharmacist-run hepatitis C clinic working in combination with a specialty pharmacy helped to improve SVR rates and completion rates compared to that seen in literature.
- Over forty percent of our patients did not obtain labs to assess SVR.
- **Future Impact:** Addition of 12 week post treatment visit with pharmacist-run clinic vs. provider office.

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