A comparison of two methods to detect chronic hepatitis B and C patients who were lost to follow up

Why operation return?
- Treatment options have improved enormously
  - hepatitis C: curable
  - hepatitis B: effective suppression
- But: many patients lost to follow up

How to detect these patients most effectively?

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Methods: detection and evaluation

- Detection: comparison of two methods
  - laboratory reports vs. notification records
  - region of Arnhem, the Netherlands
  - past 15 years

- Evaluation by general practitioner
  - lost to follow up?
  - yes: evaluate indication for treatment
Results:

Detected in total
Hepatitis B: 282
Hepatitis C: 53

Overlap Laboratories
Public Health Office
Hepatitis B: 91 (32%)
Hepatitis C: 12 (23%)

Laboratories only
Hepatitis B: 273 (97%)
Hepatitis C: 49 (92%)

Public Health Office only:
Hepatitis B: 9 (3%)
Hepatitis C: 4 (8%)
Results: evaluation of treatment indication

Detected
- Hepatitis B: 282
- Hepatitis C: 53

Invitation for evaluation
- Hepatitis B: 37
- Hepatitis C: 0

Indication for treatment
- Hepatitis B: 7
- Followed up
  - Hepatitis B: 15

No invitation for evaluation
- Hepatitis B: 245
  - Under medical concern: 99 (41%)
  - Current GP not known: 79 (32%)
  - Other reasons: 67 (27%)
- Hepatitis C: 53
  - Under medical concern: 18 (34%)
  - Current GP not known: 17 (32%)
  - Other reasons: 18 (34%)

No response
- Hepatitis B: 17
Conclusions

- Detection of chronic hepatitis B and C patients who were lost to follow up enables evaluation and access to current treatment options

- Detection by laboratory reports is far more effective than detection by notification records

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