

## Hepatitis C Test Proforma

This proforma is designed to record and prompt appropriate discussion prior to Hepatitis C testing and to ensure fully informed consent is obtained before testing.

It should be used in conjunction with the accompanying sheet 'Hepatitis C testing: back-up information'

Name ..... DOB ...../...../.....

Date of interview ...../...../.....

### Reason for test discussion.

- Patient request: (give reason for concern).....
- Risk behaviour : (circle type of risk) e.g. drug use/ blood products/needlestick injury/ sexual risk
- Antenatal
- Investigation of illness
- Other (specify).....

### Risk Assessment (see 'Who should be tested?' on accompanying sheet)

Nature of risk .....

Timing of risk.....

### Patient Knowledge and Awareness : Checklist (✓ box to indicate patient knowledge or advice given)

- Test is for antibodies only - PCR result may be required for further assessment/referral.
- Antibodies can develop up to 6 months after exposure - negative test may need to be repeated.
- Natural history and disease progression variable and related to impact of treatment.
- Harm Reduction strategies to: reduce or stop sharing injecting equipment (including swabs, filters and water)  
keep alcohol intake below recommended limits (21 units p/w for men, 14 for women)
- Life insurance and mortgage issues – see accompanying sheet.
- Patient's understanding of risk factors – see 'Who should be tested?' on accompanying sheet.
- Risk of transmission to others:: sexual, vertical, and social. – see 'Who should be tested?'

### Risk for other viruses

HAV: risk YES/NO  
test YES/NO

HBV: risk YES/NO  
test YES/NO

HIV : risk YES/NO  
test YES/NO

Immunisation for: Hepatitis A 1<sup>st</sup>...../...../..... 2<sup>nd</sup>...../...../.....  
Hepatitis B 1<sup>st</sup>...../...../..... 2<sup>nd</sup>...../...../..... 3<sup>rd</sup>...../...../.....

### Support and coping considerations

How would you feel if test were positive? Who would you tell?

Who is available to offer support if you get a positive result?

Is this the right time for a test?

### Assessment of Risk: If no : reassure re concerns

If yes : test performed? No – future test advised? Yes/No

Yes – appointment for result ...../...../.....  
support while awaiting result (partner/friend/GP/agency)

## **Hepatitis C testing: back-up information 1.2.04**

### **Who should be tested?**

Antibody testing should be considered for

- Anyone who has ever injected drugs
  - Current injecting drug users;
  - Recipients of blood (before Sept 1991), or blood products (before 1986 in the U.K.) – if not already tested.
  - Regular sexual partners of those with HCV (risk of sexual transmission low approx 5%)
  - Children born to mothers with HCV (risk of transmission 6%; may be higher if co-infected with HIV)  
N.B. test result may be difficult to interpret in children under 18 months old, due to the presence of maternal antibodies.
  - People who may have had unsterile medical treatment abroad
  - People who may have had ear piercing, body piercing, tattooing or acupuncture with unsterile equipment.
- [Ref: Hepatitis C Essential information for professionals crown copyright 2002. [www.doh.gov.uk/hepatitisc](http://www.doh.gov.uk/hepatitisc)]

Risk of transmission by routes other than those listed above is remote. There is some remote risk of social transmission through sharing of contaminated items such as razors or toothbrushes.

### **Reasons to be tested.**

- Testing can allay anxiety even if the result is positive
- A positive test allows early monitoring and intervention by specialist if required
- Opportunity to immunise against Hepatitis B and A. (co-infection significantly worsens prognosis)
- Testing can encourage the patient to change patterns of behaviour such as injecting drug use or excessive drinking whether the result is positive or negative.

### **Facts about HCV and the Test**

- HCV test is for antibodies only: Positive test indicates that there has been infection at some time. 80% continue with active infection – this can only be confirmed by PCR test (test of viral load). Liver biopsy may be required to decide about treatment.
- Antibodies can develop up to 6 months after exposure = *window period*. Negative test may need to be repeated.
- Natural history and disease progression: majority of those who become infected with hepatitis C infection are unaware of it at the time and 20% will clear the virus within 2-6 months. The other 80% will develop chronic hepatitis C and 60% of the total will develop some liver disease, 16% of these will develop cirrhosis and 1-2% may go on to develop hepatocellular carcinoma or liver failure. Even without significant liver damage, some people with HCV have symptoms of headache, chronic fatigue etc. possibly due to infection of the CNS.
- Impact of treatment developing rapidly – currently recommended combination therapy with pegylated interferon and ribavirin for 6 months to 1 year results in cure for between 40- 80%, depending on genotype of the virus (1 worse, cure up to 40%, 2 & 3 between 70-80% cure) but treatment is difficult to take and has side effects, especially tiredness and depression. This needs expert referral and assessment at tertiary referral centre.
- Harm reduction: HCV spread by sharing injecting equipment such as spoons, swabs and filters as well as needles and syringes and sharing straws when snorting drugs. Important opportunity for patient education. Advise about safer sex & condom use should also be given.
- Life insurance and mortgage issues: A negative HCV test has no impact on ability to get life insurance or a mortgage. Positive test may make it more difficult to get life insurance policy or mortgage linked to a life policy.

### **Potential disadvantages of testing.**

- Is the timing right? Negative result could give false reassurance if sample is taken within window period. Are there issues behind request for a test that should be dealt with first e.g. worries about drug use, relationships.
- Anxiety whilst awaiting the result.
- Coping with a positive result will require adaptation. The uncertainty of the prognosis of HCV, even with treatment, social stigma and concerns of transmitting the infection to others can cause depression and anxiety leading to risk of increased drug use, relationship problems. Rehearse with them how they will feel if result is positive or negative.

### **Getting the result**

- Ideally in person by the person who has done the test
- Patient may want to have someone with them when they receive result
- How will they cope while waiting for the result? – offer support or direct to local agency.

### **Giving the result**

- If negative check if retesting required (window period); discuss and consider how to avoid future risk
- If positive review pre-test discussion; check PCR if they haven't had one; and referral to specialist.