



Dr Gaham Gulbransen

Kingsland Family Health Centre
Auckland

Addiction Issues - Shift Happens - Main Session (Workshop options scheduled)

Friday, 21 June 2013

Start 3:15pm

Duration: 25mins

Baytrust



  **Rotorua GP CME 2013**

General Practice Conference & Medical Exhibition

20-23 June 2013 | Energy Events Centre | Rotorua

ADDICTION Issues

‘Shift Happens’

Graham Gulbransen,
FRNZCGP, FACHAM
General Practitioner, Kingsland

Rotorua GPCME 21 June 2013

The GP Consultation

Tony Dowell

GPCME Rotorua, 12/6/11

'We do amazing things in 15 minutes...

[with] hugely skilful management &
social interaction...'

Try, 'have you got any more questions
today?'

3 Take Home Points:

- 'Shift happens!' – brief advice & counselling in 1^o care are effective
- Alcohol use single screening question: 'In the average 7 day week, how many alcohol drinks do you have?'
- Anyone who does have hepatitis C or is cured will always be HCV Ab positive, so one HCV Ab test is all that is ever needed. There is no point in repeating the test.

Today's Topics

Annual smoking-related deaths = 4500 – 5000

Annual alcohol-related deaths = 600 – 1000

New Zealanders with hepatitis C > 50,000

Undiagnosed cases > 30,000

200 deaths pa
[HCV figures from Ed Gane]

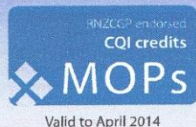
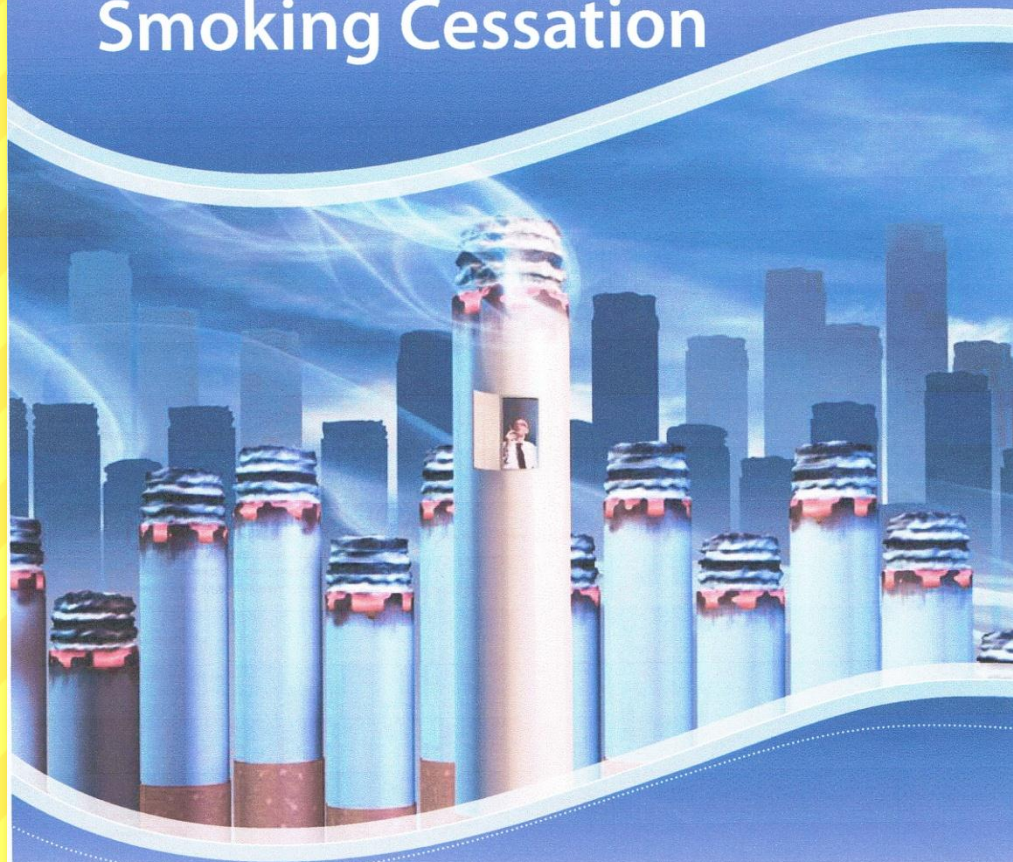
'Addiction involves repeated powerful motivation to engage in a purposeful behaviour that has no survival value... with significant potential for unintended harm' (Robert West, 2012)

Primary care teams can support behaviour change & make 'shift happen'.

Nicotine

CLINICAL AUDIT

Supporting Smoking Cessation



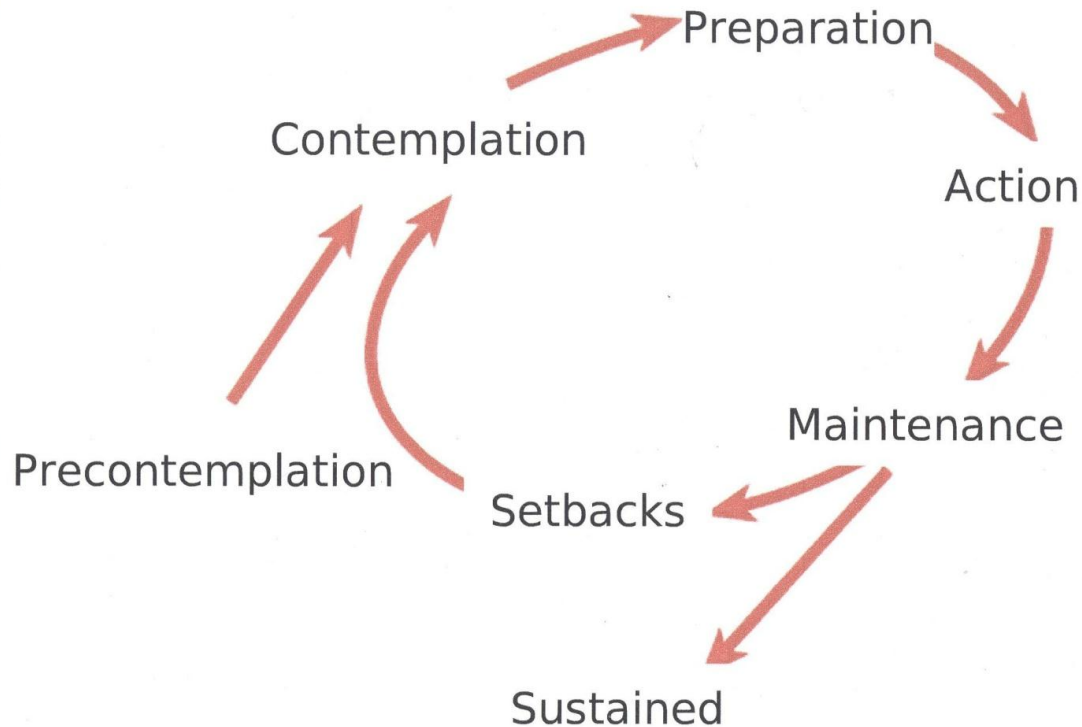
- Approved Clinical Audit
- % smoking status recorded
- How well you are managing smoking cessation

ABC prompts

- **A**sk about smoking status;
- to give **B**rief advice to stop smoking to *all smokers* regardless of their interest in quitting
- *and to provide evidence-based* **C**essation support for those who wish to stop smoking.

Wheel of Change

A motivational framework



Bottom Line: Give Brief Advice to all smokers

Benefit of stopping smoking:

Six hours of increase in life expectancy for every day of smoking prevented

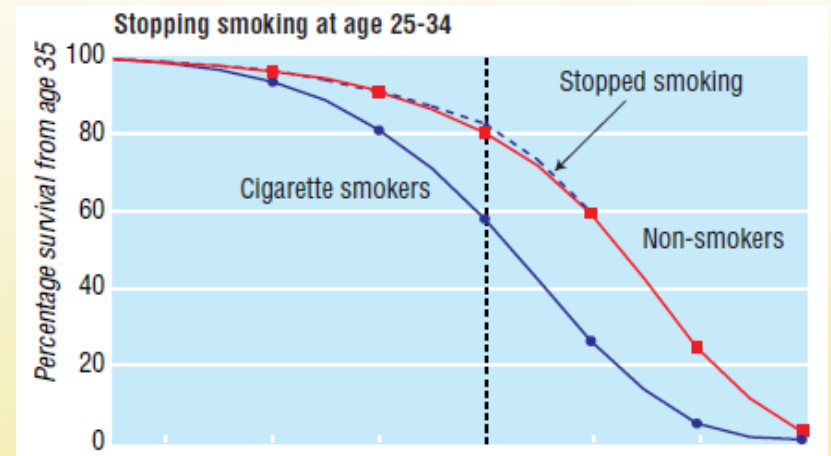
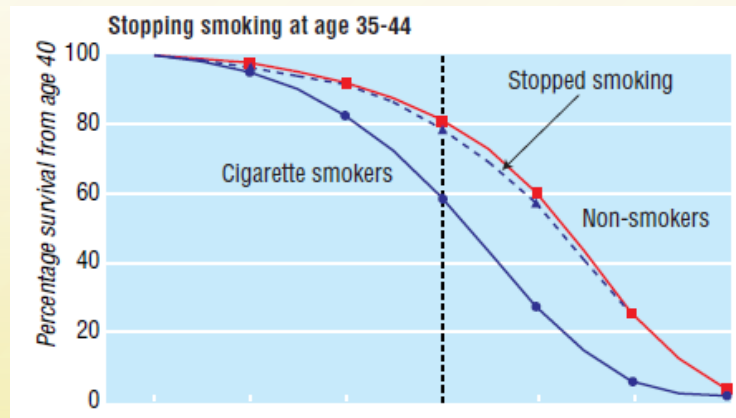
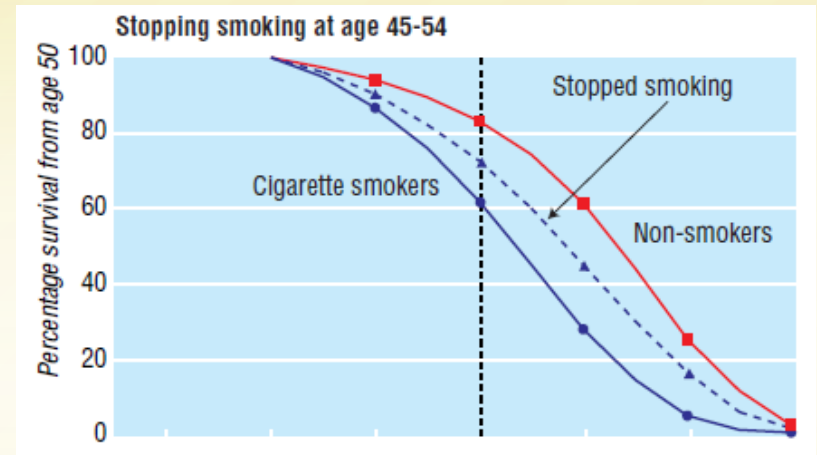
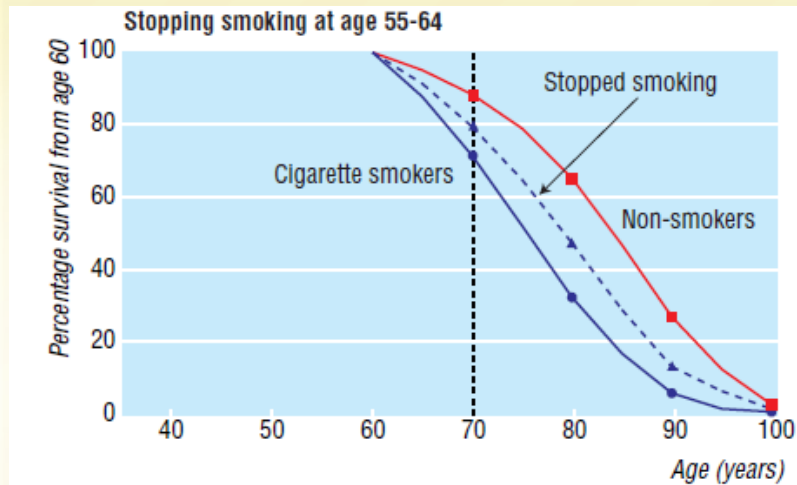
Improved health and functioning

Greater happiness and life satisfaction

Possible benefit to mental health

More disposable income

Benefits of stopping smoking



Smoking cessation

- Quitting before age 30 →
normal life expectation
- Continuing to smoke after age 30 →
smoker loses 3 months of life
for every year of continued smoking

Are smokers interested in your offer of help?

In England 10% smokers who received offer of help report having tried to quit as a result

Heavier smokers are just as likely to respond as lighter smokers

Smokers from lower socio-economic groups are more likely to respond

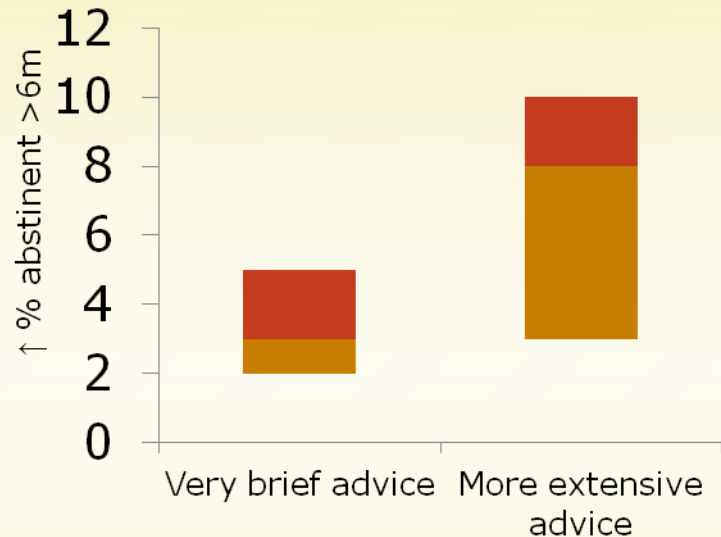
- Willpower method (unassisted quit rate):
2 to 3%,
Brief advice can increase quitting by a
further 1 to 3%
(median NNT = 34)

Stead et al. Physician advice for smoking cessation. Cochrane Database of Systematic Reviews 2008, Issue 2

Brief advice: efficacy

Stead et al 2008, Cochrane

- Very brief advice: N=13,724
- More extensive advice: N=1,254
- 95% confidence intervals from meta-analyses



Aveyard et al 2012, Addiction

- Advice only increased quit attempts by 24% (95% CI: 16-33%)
- Offering behavioural support increased quit attempts by 117% (95% CI: 52-210%)
- Offering prescription increased quit attempts by 68% (95%CI: 48-89%)

Graham Gulbransen NZMC11258 HPI14AEFA
MB ChB, Dip Obs, FRNZCGP, FACHAM. Family Doctor & Addiction Specialist
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495 New North Rd, Tamaki Makaurau, Auckland 1021
Phone 09 815 1475, Fax 846 7195, Healthlink kingslhc

Dr Graham Gulbransen
NZMC Reg No. 11258

Mast Galaxy Glitter
23 Galaxy Drive, Grey Lynn, AUCKLAND
GMS: A3

Rx
Dispense stat list medicines once only unless endorsed close control
DOB: 12 Oct 1940

Item Count:
Subsidy Card:

NHI: 4121429

1 Aug 2010

GENERIC SUBSTITUTION IS PERMITTED

Nicotine 21mg/24hours Transdermal Patch
Sig: 1 patches, Once Daily
Mitte: 1 mth 1 Repeats

Nicotine 2mg Lozenges
Sig: 6 boxes of 36, suck hourly prn
Mitte: 1 mth 1 Repeats

Dr Graham Gulbransen _____

NICORETTE® QuickMist



- Cost: \$45 at Countdown, \$50 at pharmacy
- 150 puffs = 75 cigarettes



QuickMist
For *Fast*
Craving Relief

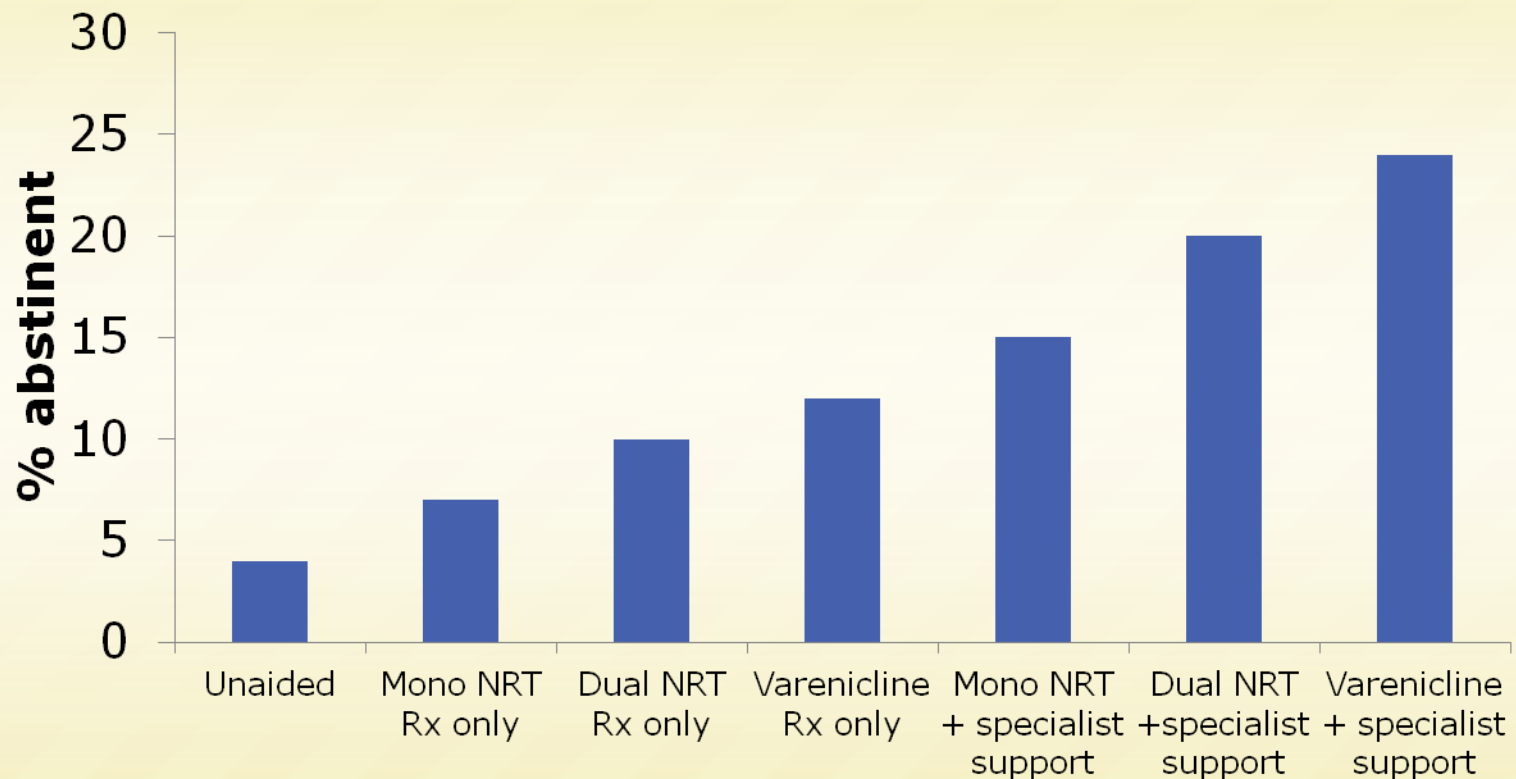
*Clinically proven craving relief
starting from just 60 seconds.**



*2x1mg/sprays

NICORETTE® products contain nicotine. Stop smoking aid. Always read the label. Use only as directed. If you have any side effects or require further information consult your healthcare professional. Johnson & Johnson (New Zealand) Ltd, Auckland. ©Registered Trademark.

52-week abstinence rates for selected methods of stopping smoking



Based on treatment as directed in guidelines

Bupropion, nortrip = dual NRT

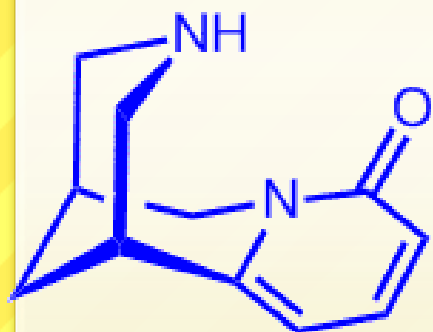
Cytisine

Tabex

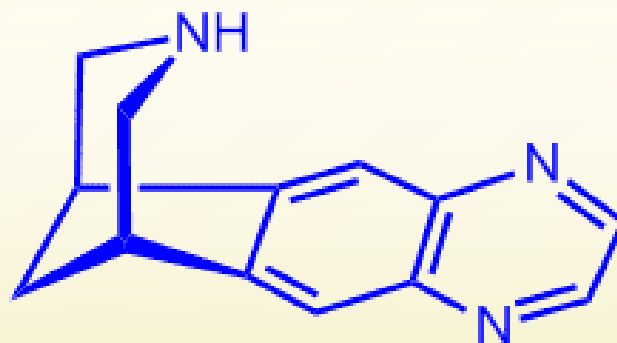
- derived from the golden rain tree
- related to kowhai tree that has cytisine
- used for 40 years in Bulgaria
- was modified → varenicline (chamfix)
- may appeal to Maori, smoking rate over 40%



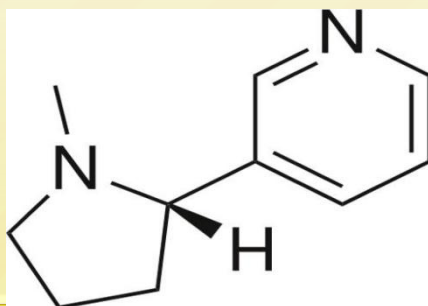
<http://gallagherresearchgroup.files.wordpress.com/2012/01/cytisine-and-othe-nicotinic-receptor-binders.gif>



Cytisine



Varenicline
(Chantix™)



Nicotine

- Tabex is available from international websites but is not permitted to be sold in New Zealand as it is a medicine and is not yet registered by the Health Ministry
- Auckland University's Clinical Trials Research Unit with Quitline, is conducting a trial comparing Tabex to nicotine replacement therapy (NRT).

[www.nzherald.co.nz & personal communication.]

APPLICATION FOR SUBSIDY BY SPECIAL AUTHORITY

APPLICANT (stamp or sticker acceptable)

PATIENTNHI: **REFERRER** Reg No:

Reg No: First Names: First Names:

Name: Surname: Surname:

Address: DOB: Address:

..... Address:
.....

Fax Number: Fax Number:

Varenicline tartrate

INITIAL APPLICATION

Applications from any relevant practitioner. Approvals valid for 5 months.

Prerequisites (tick boxes where appropriate)

☐ Short-term therapy as an aid to achieving abstinence in a patient who has indicated that they are ready to cease smoking
and

☐ The patient is part of, or is about to enrol in, a comprehensive support and counselling smoking cessation programme, which includes prescriber or nurse monitoring

and

☐ The patient has tried but failed to quit smoking after at least two separate trials of nicotine replacement therapy, at least one of which included the patient receiving comprehensive advice on the optimal use of nicotine replacement therapy

or

☐ The patient has tried but failed to quit smoking using bupropion or nortriptyline

and

☐ The patient has not used funded varenicline in the last 12 months

and

☐ Varenicline is not to be used in combination with other pharmacological smoking cessation treatments and the patient has agreed to this

Quitline referrals@quit.org.nz

 0800 778 778

[Home](#) [Help to Quit](#) [Reasons to Quit](#) [Staying Quit](#) [Success Stories](#) [Helping others quit](#) [Media](#) [About Us](#)

My Page ☐ Remember me
Lost your password?

Thinking About Quitting

About Quitline online

Quit Plan

Quit Blogs

Quit Stats

Txt2Quit

Patches, Gum, Lozenges



With Txt2Quit we'll send to
quitting tips and support,
straight to your mobile.
Sign-up to use this now, you can then order this.

Not sure if you want to quit?

Yes, I want to quit!

or Fax
04 460
9879

Welcome to Quitline, New Zealand

Quitting smoking is hard work but you don't have to do it alone. If you are thinking about quitting, are working to become a non-smoker, or you have relapsed - you will find support information on this site or by calling 0800 778 778

Our Advertising Campaign

Click the video below to see our new ad or [click here](#) to see the entire campaign.

Quit Blogs

42,557
total posts



Smile...

Been gone for a while but happy to say that i am still smoke free. 1 yr, 6 months and counting.... Honestly...

By [HappyShells](#)

Quitting

Nervous to see how long its going to take to stop the cravings! Thinking about raising money from friends...

By [Andy12](#) | 2 comments

Decision made

Flat inspection done, decision made, pick up the keys next wed and start moving in. ora auna be like living

News

Write a Quit Smok and W

We're loo
singer/so
write and
(song), h
[Click here](#)
informati

Price |
Patch
Lozen

face to face
counselling
available²⁴

Alcohol

Screening for Risky & Problem Drinkers



Alcohol

- **'In the average 7 day week, how many alcohol drinks do you have?'**
- AUDIT, brief AUDIT or AUDIT C [consumption]
- 'any general opening question leads to opportunities to explore alcohol use. In the series I did for my thesis in my practice, half those with alcohol problems were identified by screening and half from clinical awareness during consults.'

Dr John McMenamin

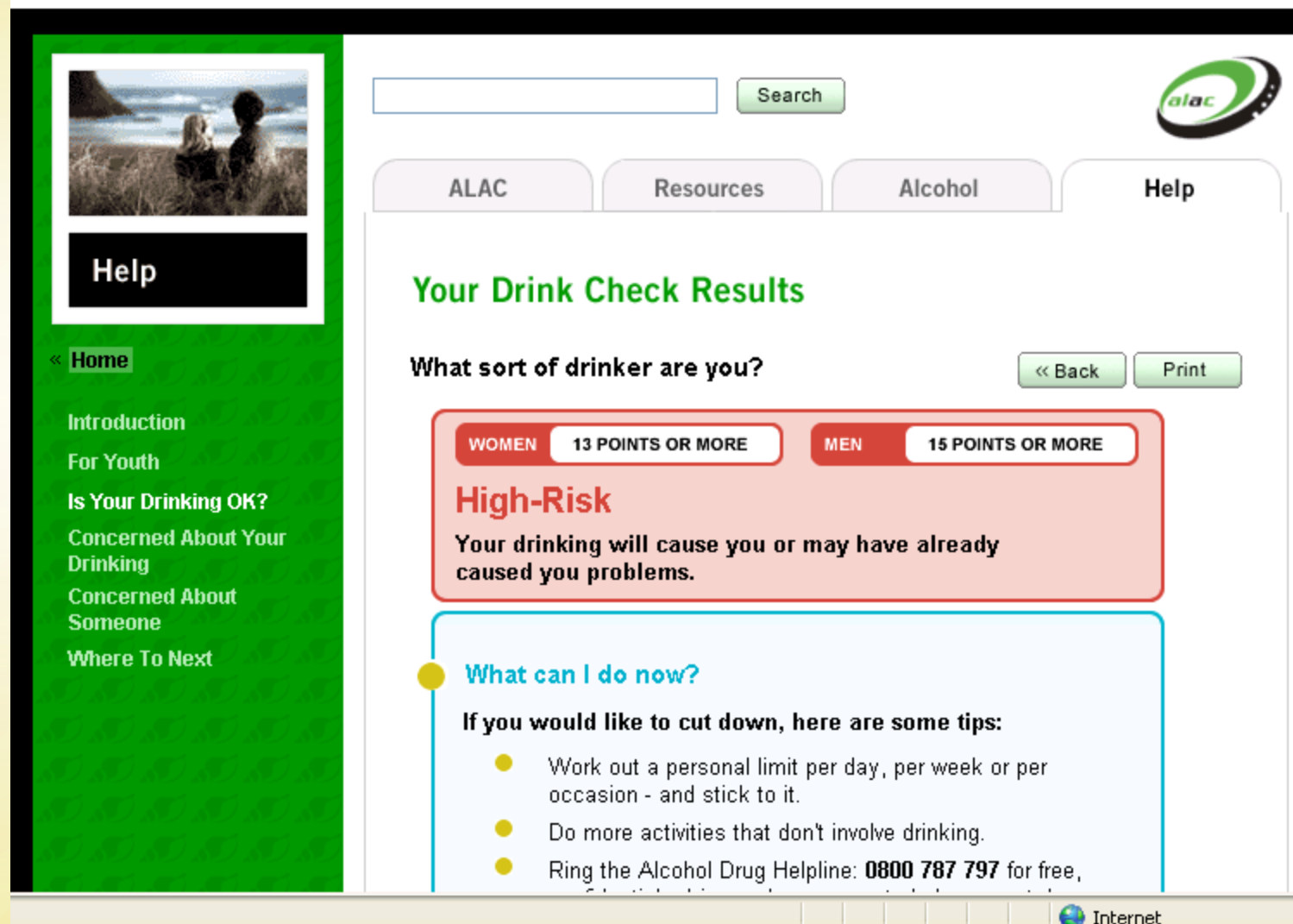
We need to ask

Most patients are open to being asked about alcohol consumption

Alcohol NZ Guidelines 2012

- See conference app
- <http://www.alcohol.org.nz/>
for guidelines & leaflets

Links you to ALAC website



The screenshot displays the ALAC website interface. On the left is a green sidebar with a 'Help' button and a list of links: Home, Introduction, For Youth, Is Your Drinking OK?, Concerned About Your Drinking, Concerned About Someone, and Where To Next. The main content area features a search bar, the ALAC logo, and navigation tabs for ALAC, Resources, Alcohol, and Help. The 'Your Drink Check Results' section shows a 'High-Risk' status for both women (13 points or more) and men (15 points or more), with a warning that drinking will cause or may have already caused problems. Below this, a 'What can I do now?' section provides tips on cutting down, such as setting personal limits, engaging in non-drinking activities, and contacting the Alcohol Drug Helpline at 0800 787 797. The footer includes a row of social media icons and an 'Internet' label.

Help

[Home](#)

[Introduction](#)

[For Youth](#)

[Is Your Drinking OK?](#)

[Concerned About Your Drinking](#)

[Concerned About Someone](#)

[Where To Next](#)

Search

ALAC Resources Alcohol Help

Your Drink Check Results

What sort of drinker are you? [« Back](#) [Print](#)

WOMEN 13 POINTS OR MORE **MEN** 15 POINTS OR MORE

High-Risk

Your drinking will cause you or may have already caused you problems.

What can I do now?

If you would like to cut down, here are some tips:

- Work out a personal limit per day, per week or per occasion - and stick to it.
- Do more activities that don't involve drinking.
- Ring the Alcohol Drug Helpline: **0800 787 797** for free,

Internet

Standard Drinks

Wine

Port/
Sherry

Small
glass

Large
Glass



1 SD



1 SD



2 SD



1 SD

Spirits

1 nip

2 nips

3 nip
cocktail



2 SD



3 SD

Beer

Small
glass

Handle



1 SD



2 SD

1 Standard drink = 10 g alcohol

Reduce your long-term health risks



No more than...

2

STANDARD DRINKS

3

STANDARD DRINKS

Daily

and no more
than 10 a week

and no more
than 15 a week

And

at least 2 alcohol-free days per week

Reduce your risk of injury



No more than...

4

STANDARD DRINKS

5

STANDARD DRINKS

On any single occasion

Pregnant women



No alcohol

0

STANDARD DRINKS

There is no
known safe level
of alcohol use at
any stage of
pregnancy

NZ Low Risk
Alcohol Guidelines
2012

Alcohol NNT = 8

- It is estimated that the number of hazardous or harmful drinkers that need to receive intervention for one to reduce drinking to low-risk levels is 8
- It could be more effective if we consider those who don't reduce drinking immediately, but are primed to act at a later date.

NICE Clinical Knowledge Summaries. The Alcohol Brief Interventions page

'The benefits of brief intervention were similar in the normal clinical setting and in research settings with greater resources.'

Kaner et al (2009), Effectiveness of brief interventions in primary care populations, Cochrane Summaries

***Bertholet, N., Daeppen, J-B., Wietlisbach, V. et al. (2005)
Reduction of alcohol consumption by brief alcohol
intervention in primary care: systematic review and meta-
analysis. Archives of Internal Medicine 165(9), 986-995.***

Authors' conclusion:

Focusing on patients in primary care, our systematic review and meta-analysis indicated that brief alcohol intervention is effective in reducing alcohol consumption at 6 and 12 months.

Kaner, E F et al (2007) 'Effectiveness of brief alcohol interventions in primary care populations', Cochrane Database of Systematic Reviews, Issue 2;

Authors' conclusions:

- Brief interventions consistently produced reductions in alcohol consumption.
- Current literature had clear relevance to routine primary care.

Whitlock, E P et al (2004) 'Behavioral Counseling Interventions in Primary Care To Reduce Risky/Harmful Alcohol Use by Adults: A Summary of the Evidence for the U.S. Preventive Services Task Force', *Annals of Internal Medicine*, vol. 140.

Conclusions of US Preventive Services Task Force

- Behavioral counseling interventions for risky/harmful alcohol use among adult primary care patients are an effective component reducing risky/harmful alcohol use.

How does it work in practice?

The Whanganui ABC Alcohol pilot, Dr John McMenamin explored how ABC interventions could be delivered in a New Zealand Primary Care Setting to address alcohol related risk and harm.

As detailed in RNZCGP *Implementing the ABC Alcohol Approach in Primary Care*:

- **ASK**
- **BRIEF ADVICE**
 - Safe drinking, where to get advice
- **COUNSELLING**
 - 'Establish rapport
 - Identify goals
 - Choose strategies'.

Limitations of guidelines....

- 'it must be acknowledged that motivation to get drunk and have fun are important predictors of alcohol consumption, and that health concerns often have little influence on people's alcohol consumption....'

Furtwaengler & de Visser (2013), Lack of international consensus in low-risk drinking guidelines, *Drug and Alcohol Review*, 32, 11-18.

- 'young people may use alcohol unit labelling to help them select the most potent drinks'

Furtwaengler & de Visser (2013), Lack of international consensus in low-risk drinking guidelines, Drug and Alcohol Review, 32, 11-18.

MedTech-32 Kingsland Family Health Centre

File Edit Patient Module Daily Record Report Tools Utilities Setup ManageMyHealth ConnectedCare CAT Window Help

GLITTER Galaxy (1234.4)
23 Galaxy Drive, Grey Lynn, 12340568

A1 - N 4121429 65.00 GG A-! CAS
12 Oct 1940 72 yrs Male

New Consultation

Main More Audit

HISTORY

EXAMINATION

ASSESSMENT

PLAN

Clinical Notes

Details

GG

Patient Manager

Clinical Template History Appointments Immunisation Contacts Patient Transactions A/c Holder Account Patient Tasks Forms
Daily Record Medications Classifications Medical Warnings Front Page Recalls Screening Accidents Out Box Inbox

18 Apr 2013 (Thursday) JD

Cholesterol Info
CVD assessment

14 Jan 2013 (Monday) GG

Non Smoker (1371.00)
Smoking Assessment
Smoking Assessment
Current smoker (137R.00)
Smoking Assessment
Ex smoker (137S.00)
Smoking Assessment
Ex smoker (137S.00)

02 Sep 2012 (Sunday) GG

Transfer of records
Transfer of records

ADM

30 - Panadeine Tab - 2 tab, Every Four Hours FOR PA
Lab referral, IqA anti tissue transglutaminase Ab

20 Mar 2012 (Tuesday) ADM

1 - Amoxycillin 250mq Cap - Four Times Daily
Lab referral

18 Mar 2012 (Sunday) GG

HISTORY

03 Mar 2012 (Saturday) ADM

Referral Letter A4

01 Dec 2011 (Thursday) HC

Health Check Recall

08 Nov 2011 (Tuesday) HC

Alcohol (ALC) - 7-9
Heavy drinker - 7-9u/day (1365.0)

19 Aug 2011 (Friday) HC

Patient Info to AE

ASK ABOUT SMOKING
THEN
ABOUT ALCOHOL USE

SERVER1 GG Last Login: 19 May 2013 03:37 PM Main Database (M) Waiting (GG): 0

start MedTech-32 Inbox - Microsoft Out...

10:36 a.m.

Option to complete AUDIT

 New Alcohol Consumption (BETA) (Whanganui Regional PHO)

[Main](#) | [Alcohol Consumption](#) | [More](#) | [Audit](#)

SECTION A:

1. How often do you have a drink containing alcohol?

☐ Never ☐ Monthly or less ☐ 2-4 times a month ☐ 2-3 times per week ☒ 4+ per week

2. How many standard drinks containing alcohol do you have on a typical day when you are drinking?

☐ 1-2 ☐ 3-4 ☒ 5-6 ☐ 7-9 ☐ 10+

3. How often do you have six or more drinks on one occasion?

☐ Never ☐ Less than monthly ☐ Monthly ☒ Weekly ☐ Daily or almost daily

Score: 9 A score of 5 or more for men suggests that further assessment is appropriate.

SECTION B:

4. How often during the last year have you found that you were not able to stop drinking once you had started?

☐ Never ☐ Less than monthly ☐ Monthly ☐ Weekly ☐ Daily or almost daily

5. How often during the last year have you failed to do what was normally expected from you because of drinking?

☐ Never ☐ Less than monthly ☐ Monthly ☐ Weekly ☐ Daily or almost daily

Brief Advice for a Pre-contemplative patient

Modified from

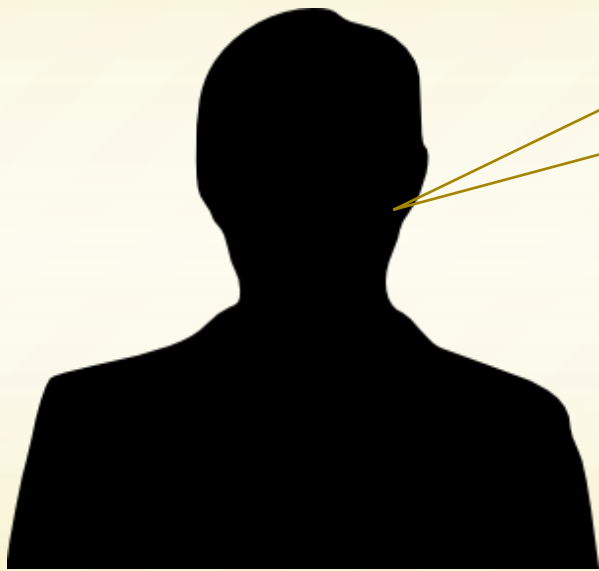
Dr John McMenamin's slides



It looks like your drinking pattern could be causing you problems. What do you think about this?



Oh well you have to die of some thing – at least I will die happy!



I see – do you
have any concerns
about your
drinking?



Na – not
really



How about your partner, do they have any concerns about your drinking?



Yeah, they think I spend too much money, but hey I earn it!



Ok, here's a leaflet to
look at. Let's talk more
at your next
appointment – How does
that sound?



OK

Brief Advice for a Contemplative patient

Now lets see the difference

Modified from

Dr John McMenamin's slides



It looks like your drinking pattern could be causing you problems. What do you think about this?



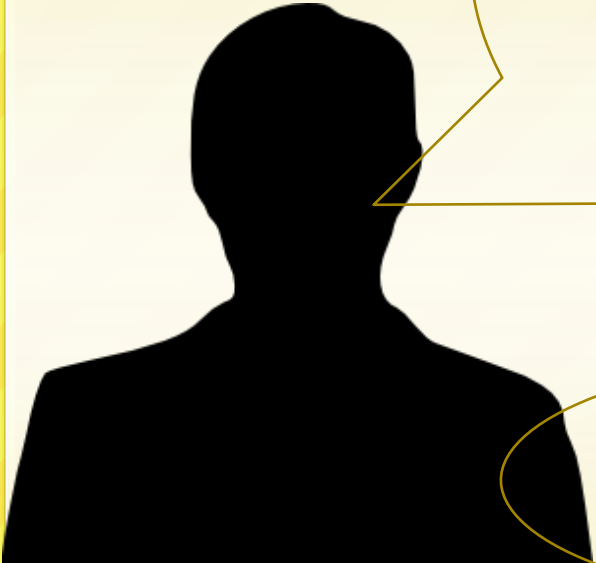
Well, I have tried to cut down in the past, but it never lasts.



Good that you've tried.
It often takes people a
few times. Tell me
more...



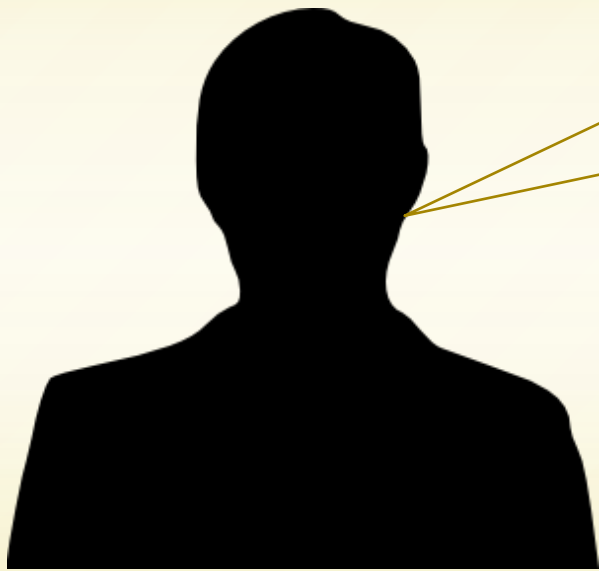
Well I think I
should cut down. I
just don't know
how to...



Have you seen the ALAC site?
It gives some really good
information on how to ease up
on the drink. If you like I could
make you an appointment at
Addiction Services. They can
support you in any changes
you want to make.



Does it mean I will
have to stop
drinking?



Not necessarily.
There are lots of
options. You
decide - it is up
to you.



Yeah – it
would be
good to
see
someone

Keep working on
open-ended questions
to allow the patient to be heard

Hepatitis C

- Ab
- Viral load
- Who to screen
- Treatments

From Prof Ed Gane

- Liver biopsy is OUT, Fibroscan is IN
- IFN is on borrowed time – IFN-free regimens will be approved here within 12 months and available for all within 3-5 years
- People with mild disease should be given the option to wait and meantime address lifestyle factors:
 - alcohol, cannabis and excess weight are **BAD**
 - coffee is **GOOD**

Chronic hepatitis C in NZ

Challenges

- 50,000+ New Zealanders have HCV
- 200 deaths/yr ➡ 600/yr by 2030
 - All preventable by earlier treatment
- <1/3 HCV+ have been diagnosed
- <1/10 have been treated

➡ **Need to increase HCV awareness, earlier diagnosis and treatment**

Targeted Testing – Ask About 6 Risk Factors for HCV Exposure

- 1. History of injecting drugs?**
- 2. Blood transfusion pre-1992 or overseas?**
- 3. Lived in or received health care in SE Asia, Middle East, Eastern Europe?**
- 4. History of jaundice or acute hepatitis?**
- 5. Previously imprisoned?**
- 6. Mother has HCV?**

The Dominion Post 13 April 2013

negligently failing to abort a transit flight between Ohakea and Wellington when weather conditions deteriorated below recommended flying conditions.

mission.

Pezaro has elected to be tried summarily and the proceedings will reconvene on Monday with evidence from the defence.

Three air crew died when their

Wellington, about 6am on April 25, 2010.

Among the final witnesses called to give evidence yesterday was Air Commodore Peter Port, who told the proceedings Pezaro's ac-

"He wasn't on search and rescue or counter-terrorism, he was going to fly over an Anzac Day parade and, in my opinion, that doesn't justify breaking the rules," Air Commodore Port said. Fairfax N



Can you say *yes*?

I've injected drugs

I got a tattoo or body piercing using unsterile equipment

I had medical attention when I was overseas

I had a blood transfusion prior to 1992

I've been in prison

**If you can say *yes* to any of these, get tested for hepatitis C.
It can be treated.**

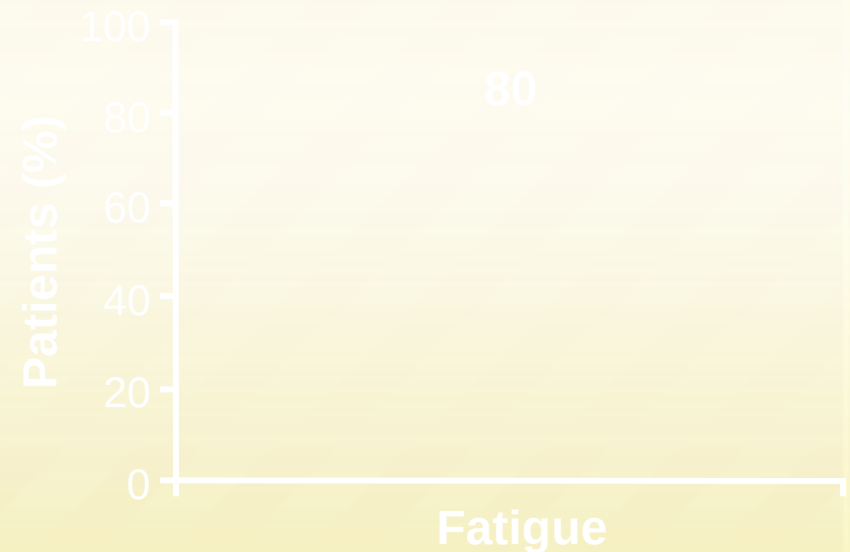
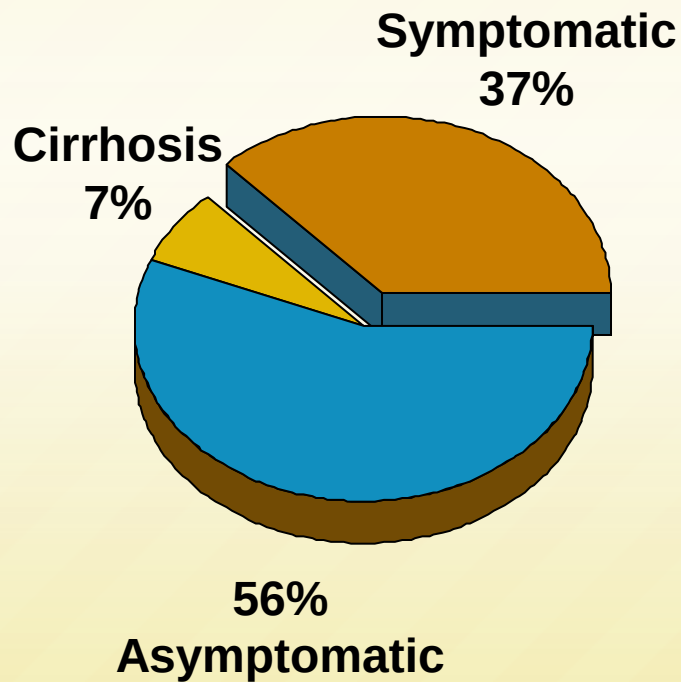


See your doctor or get a free test from The Hepatitis Foundation of New Zealand. Call 0800 33 20 10 or visit www.hepatitisfoundation.org.nz.
Hepatitis C. Know it. Test it. Treat it. Individuals pictured have models and are used for illustrative purposes only.

If stars are like diamonds, then this is close to heaven.

Appropriately called HĀLO, this brand new collection designed by Nikki Partridge includes

Symptoms, or Lack of, in Chronic HCV Infection



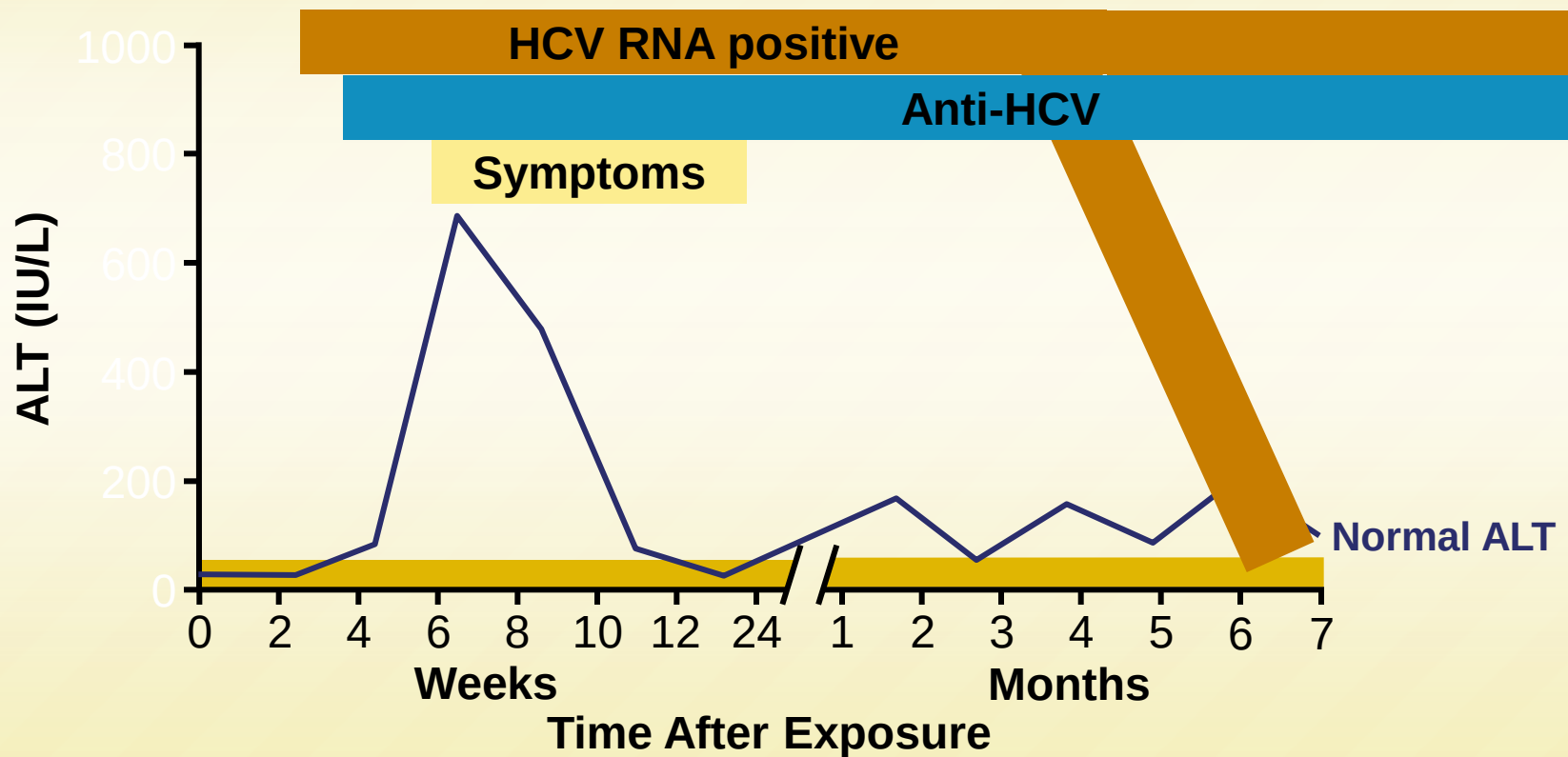
Common Symptoms of Hepatitis C in the Absence of Cirrhosis

- Fatigue
- Impaired cognitive functions
- Low grade fevers
- Abdominal discomfort
- Appetite disturbances
- Abdominal pain
- Digestive disturbances
- Migratory arthralgia or myalgia
- Depression
- Anxiety
- Many others

HCV diagnosis and staging

- **Symptoms and Signs**
 - Few until **advanced** cirrhosis
- **Liver Function Test**
 - POOR marker of liver injury in HCV
 - Up to 40% have NORMAL LFTs
- **Anti-HCV ELISA screening assay**
 - Inexpensive (\$15), performed daily at all labs
 - Reflects HCV exposure, not active infection
 - Persists after viral clearance
- **Serum HCV RNA PCR assay – viral load**
 - Confirms active infection
 - Expensive (\$250), performed weekly only at reference labs (ACH, Waikato, Wgtn, ChCh)

Course of Acute HCV Infection



Hoofnagle JH. Hepatology. 1997;26:15S. Carithers RL Jr, et al. Semin Liver Dis. 2000;20:159-171. Pawlosky JM. Hepatology. 2002;36(suppl 1):S65-S73. NIH Management of Hepatitis C Consensus Conference Statement. June 10-12, 2002. Available at: <http://consensus.nih.gov/2002/2002HepatitisC2002116html>. Accessed April 10, 2007.

HCV Antibodies Do Not Protect Patients From Further Infection

Point-of-Care and Rapid HCV Tests

- Many patients don't get their blood tests done:

- concern of lack of venous access
- suspect concealed tests (drugs, HIV, other)
- fear of stigmatisation

1. On-site rapid diagnostic tests on whole blood (pinprick), serum or oral swab

2. Dried Blood Spot sent to local labs

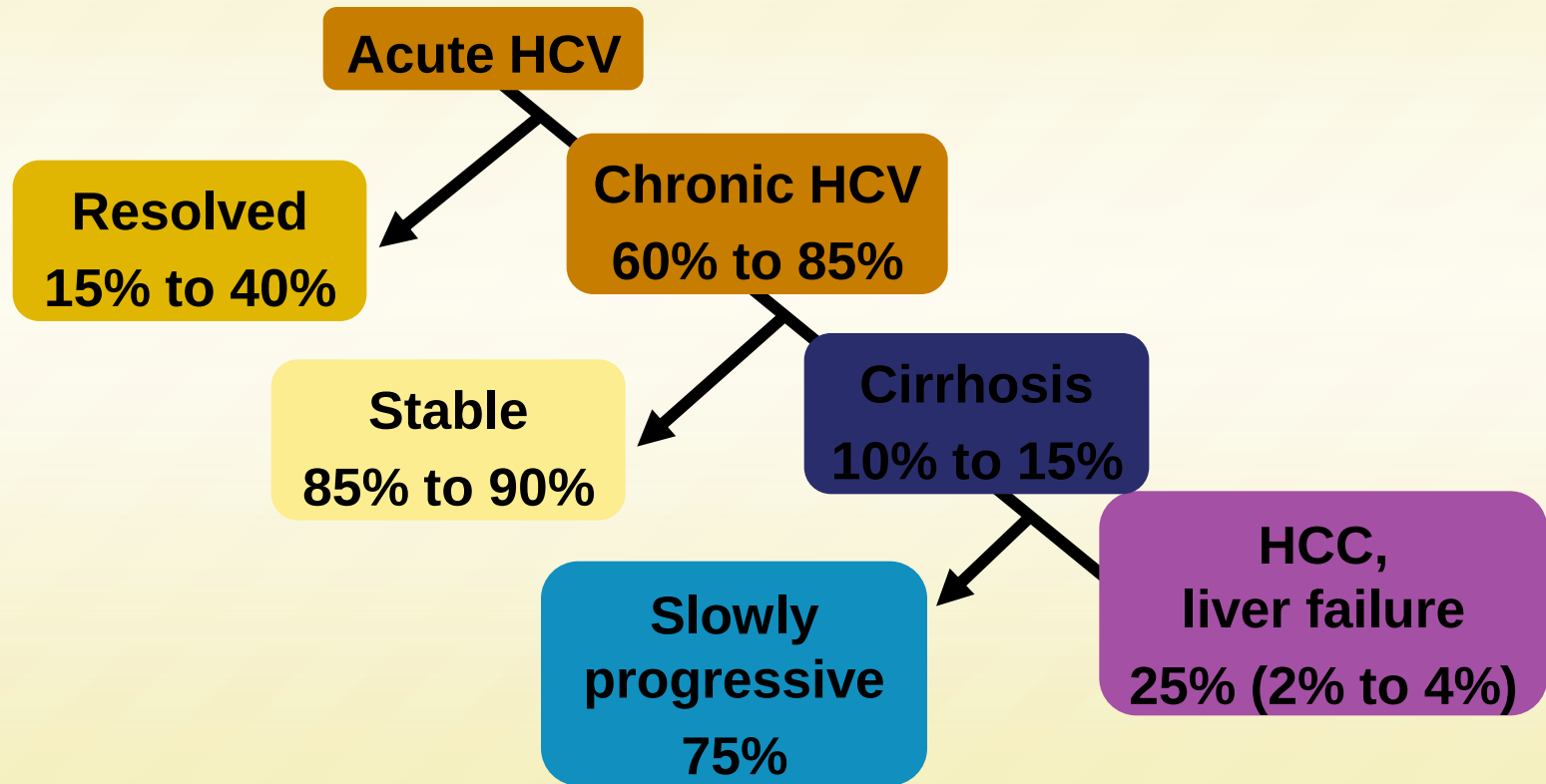
- » Collect 4 drops onto blotting paper, send to lab

Tests

- **Dried Blood Spot ⇒ local labs**
 - » Simple, no training
 - » Need follow-up appointment
 - » Much better compliance
 - » High rates of returning for test results
 - » High rates of followup attendance at clinics

Not yet available in NZ

Natural History of HCV Infection



Hepatitis C

www.ashm.org.au

Of 100 people with chronic hepatitis C who remain untreated, it is estimated that:

After 20 years

45 will not develop liver damage

47 may develop moderate liver damage

7 may develop cirrhosis of the liver

1 may develop liver failure or liver cancer

After 40 years

30 will not develop liver damage

45 may develop moderate liver damage

20 may develop cirrhosis of the liver

5 may develop liver failure or liver cancer

Hep C – what Factors are associated with rapid progression to Cirrhosis

- **Alcohol > 5 drinks/day**
 - Paralyzes immune response to HCV
 - Increases HCV replication + injury
 - Recommended limit
 - Keep below ALAC guidelines
 - No alcohol if cirrhosis or on Interferon
- **Cannabis >2 joints per day**
 - Cannabinoid receptors in liver cause fibrosis
- **Obesity**

Hep C – what Factors are associated with slow progression to Cirrhosis

1. Young age

2. Female gender

3. Coffee!

- Dose-related ↓ risk of cirrhosis
 - 1 cup/day ⇒ reduce risk by 30%
 - 2 cups/day ⇒ reduce risk by 40%
 - >4 cups/day ⇒ reduce risk by 80%
- Klatsky, 2006*

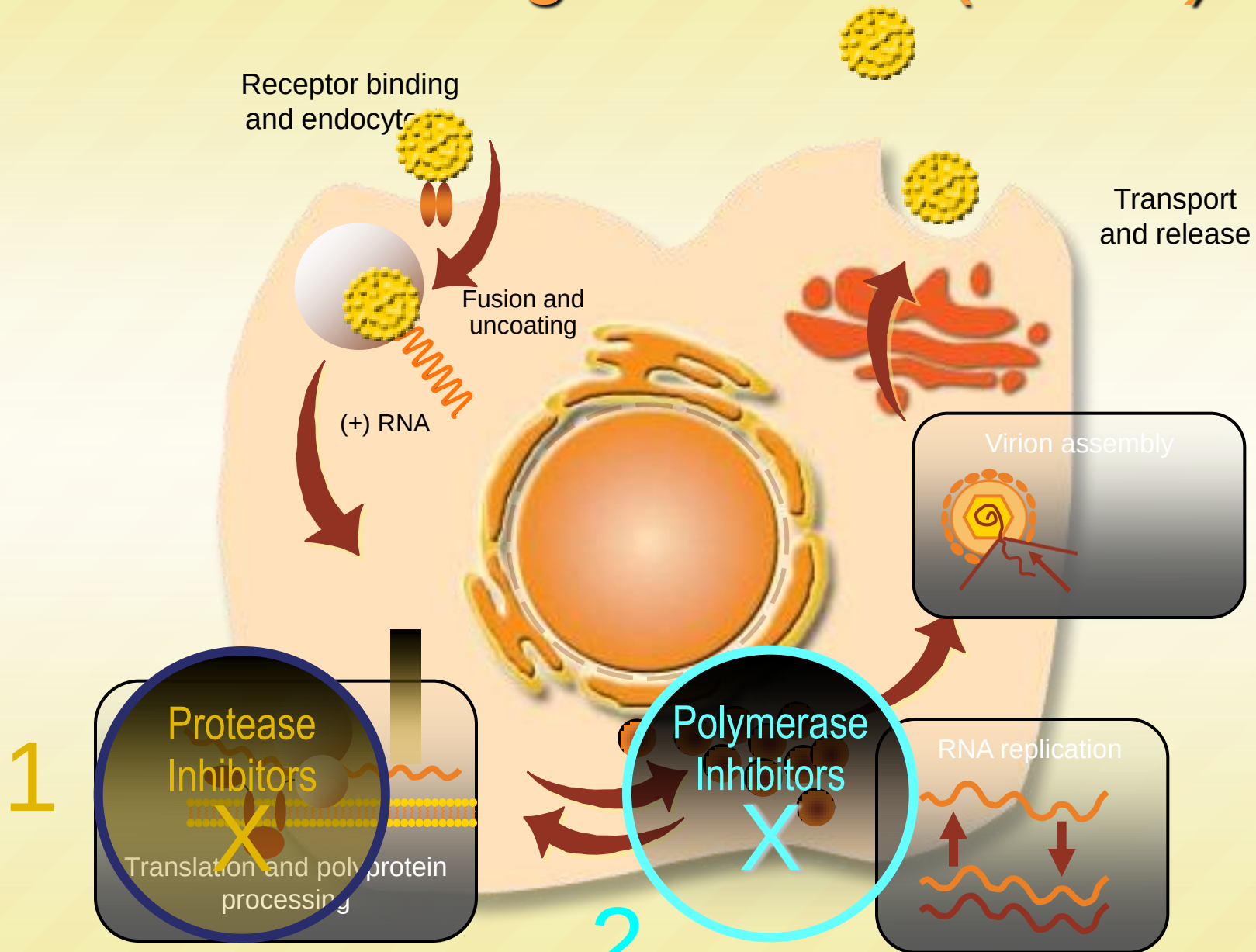
4. Antiviral therapy.

Chronic Hepatitis C - the Solution

Aims of Therapy

- 1. Prevent death**
- 2. Prevent transplant**
- 3. Prevent or reverse cirrhosis**
- 4. Improve quality of life**

Direct Acting Antivirals (DAAs)



Future Trends in HCV Therapy

Combo DAA

2 DAAs

NO IFN

12 wks

Triple Rx

Protease inhibitor
+ PEG/RBV

24 weeks

12 wks oral therapy for all HCV+
➔ Treat in Primary Care!!!

IFN-α2b
24 weeks

48 weeks

4%

9%

20yrs

2004

2012

2014

Hepatitis C E-Learning for GPs

LearnHealth ▶ Hep C - Doctors

Welcome

Learn about hepatitis C by working through the five learning modules below. Gain 1 CME credit by passing the assessment, completing the evaluation and then printing your certificate.

Access a range of resources to support you in your day-to-day work.

 [Help on using this programme.](#)

Learn About



What Is Hepatitis C	Identifying Hepatitis C	Diagnosing Hepatitis C	Treating Hepatitis C	The Future - Hepatitis C
15 min	15 minutes	15 minutes	25 minutes	10 minutes
 Start >	 Start >	 Start >	 Start >	 Start >

Gain Accreditation

Assessment

Your feedback

Print your certificate 

Post-Learning Support

Quick facts

- > What Is Hepatitis C
- > Identifying Hepatitis C
- > Diagnosing Hepatitis C
- > Treating Hepatitis C
- > The Future - Hepatitis C



Resources

- > Patient Information Sheet
- > GP Communication Guide
- > Testing & Treatment Pathway
- > Referral Form
- > Programme References & Additional Reading



Got a question?
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In Conclusion:

- 'Shift happens!' – brief advice & counselling in 1^o care are effective
- Alcohol use single screening question: 'In the average 7 day week, how many alcohol drinks do you have?'
- Anyone who does have hepatitis C or is cured will always be HCV Ab positive, so one HCV Ab test is all that is ever needed. There is no point in repeating the test.

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