



CANCER PREVENTION & RESEARCH INSTITUTE OF TEXAS

Award ID:
PP180063

Project Title:
STOP HCC-HCV Prevention Program Dissemination Project

Award Mechanism:
Dissemination of CPRIT-Funded Cancer Control Interventions

Principal Investigator:
Turner, Barbara J

Entity:
The University of Texas Health Science Center at San Antonio

Lay Summary:

Need: Hepatitis C virus (HCV) infection is the primary cause of a rapidly increasing cancer, hepatocellular carcinoma (HCC). Texas leads the nation in HCC mortality and must lead in HCC prevention to reduce this threat. Through a CPRIT grant and other funded projects, we have developed the STOP HCC-HCV Prevention Program to implement national guidelines to screen all baby born boomers (BBs) born from 1945-65 for HCV. This birth cohort has 75% of all HCV infections in the U.S. STOP HCC-HCV has demonstrated replicability and scalability based on its success in BB screening and linkage to care in 37 primary care clinics within 9 health care systems. To date, 35,885 BBs have been screened for HCV and 1,114 diagnosed with chronic HCV. We have conducted remote consultations between specialists and primary care physicians for 114 uninsured persons with chronic HCV of whom 76 have completed or started treatment with highly effective direct acting anti-viral drugs (DAAs). However, this program needs to be adopted even more widely across Texas. Overall Project Strategy: We will actively disseminate the STOP HCC-HCV program through our current website (www.stophepatitisc.com) for professionals and the public. We will also employ social media, publications, and in-person meetings/support to increase adoption. Highlights of STOP HCC-HCV programmatic features include: electronic medical record (EMR) redesign to support screening; webinars for clinician and staff training; patient education including personalized mobile app about HCV; practice performance reports/feedback; case management with care navigation; disease staging and monitoring protocols; and specialist consultation through conference calls to treat the uninsured. Using Evidence-Based Quality Improvement as the model structure for our implementation program, we will engage an advisory board of front-line healthcare leaders to review and guide modifications of the STOP HCC-HCV Prevention Program to be readily translatable and adopted by diverse Texas primary care settings. We will also continue our current collaborations with the Texas Department of State Health Service's staff to expand our STOP HCC-HCV Prevention Program.

To ensure that our program is comprehensive and replicable, we will develop a toolkit and explanatory guide covering the full range of activities from EMR redesign to HCV cure and, for persons with cirrhosis, ongoing monitoring for HCC. All components of our program will be reviewed by our advisory board on four dimensions (Relevance, Comprehensiveness, Clarity, and Feasibility) and revised to ensure value for real-world primary care practices. To address alcohol consumption, a prevalent behavior in persons with chronic HCV that increases the risk for HCC, we will augment STOP HCC-HCV with an educational program to train the primary care team to deliver the evidence-based

Screening Brief Intervention and Referral to Treatment (SBIRT) method. To expand the reach of our specialty consultation for primary care providers managing chronic HCV in uninsured patients, we are partnering with the University of Texas MD Anderson Cancer Center to implement an ECHO® telehealth program for HCV and will test it in practices currently in our STOP HCC-HCV program. Our website is a centerpiece of dissemination so our team is training to serve as webmaster to add the toolkit, explanatory guide, and latest updates for the Texas medical community – especially primary care. Our STOP HCC-HCV infrastructure will be introduced to diverse practices across the state through collaborations with our advisory board. Specific Goals: 1) Introduce and refine practice toolkit and develop a guide for HCC-HCV prevention in BBs for primary care practice, adding SBIRT training and the ECHO® telementoring program 2) Actively disseminate the STOP HCC-HCV Prevention Program using our website, social media, and in-person meetings Innovation: Our STOP HCC-HCV Prevention Program has won a national award for leadership and innovation in prevention. Our comprehensive program for primary care practices offers practical support throughout the prevention continuum from ensuring that all BBs are screened to successful cure of those with chronic HCV. We are unaware of any website that offers a comprehensive toolkit and guide for the holistic care for persons with chronic HCV and aim to fill that gap with our enhanced STOP HCC-HCV Prevention Program Significance and Impact: To date, adoption of HCV prevention in BBs has been low nationally. Texas will serve as a national role model through board dissemination of our STOP HCC-HCV Prevention Program. We aim to collaborate with policymakers and health care leaders to promote wide dissemination of our prevention program to help Texas reverse its increasing incidence and death from HCC.