Improving Knowledge of Hepatitis C Virus in Community Members Who Have Regular Contact with Populations at Higher Risk for Infection

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Introduction

- In 2016, there were 2.4 million people infected with the hepatitis C virus (HCV) in the United States, with an estimated 18,000 HCV-related deaths annually.
- Looking specifically at Arizona’s epidemiologic profile, northern Arizona has been shown to have high rates of HCV-associated mortality.
- Although a cure exists, there are many barriers to treatment, such as lack of education and low screening rates.
- Studies have shown that intravenous drug users and people with non-sterile tattoos have an increased risk of HCV infection.
- Tattoo artists and methadone clinic employees regularly interact with at-risk populations; therefore, providing HCV education to these individuals should improve overall awareness and encourage discussions about HCV with their clients.
- The aim of this study was to assess tattoo artists’ and methadone clinic employees’ knowledge of HCV, comfort discussing HCV, and perceived likelihood in discussing HCV with their clientele before and after education.

Materials & Methods

- We performed a prospective study on 18 participants who consisted of tattoo artists and methadone clinic employees in Flagstaff, Arizona.
- Participants completed a baseline questionnaire (t₀) prior to an HCV education session. An identical questionnaire was administered immediately afterward (t₁) and again two weeks later (t₂).
- The questionnaire assessed HCV knowledge and participants’ comfort in discussing HCV with clientele using a scale.
- Data were analyzed using the Sign test, with a p-value of less than or equal to 0.05 as significant.

Results

- Three tattoo studios (four artists) and one methadone clinic (14 staff members) participated in the study (n=18).
- All 18 participants completed questionnaires at all time points.
- 28% received HCV training prior to the study.
- From t₀ to t₂, objective HCV knowledge, perceived knowledge, and number of discussions with clients increased (p<0.01, p<0.0001, and p=0.02, respectively). The mean scores of the likelihood and comfort discussing HCV with future clients also increased from t₀ to t₂ (p=0.50). (Figure 1, Figure 2)

Discussion

- Educational sessions effectively increased HCV knowledge and fostered discussions between participants and their clients about HCV.
- All participants perceived a benefit to receiving HCV education; however, only 5 of 18 participants had previously received HCV training.
- This illustrates that the majority of those who are most in contact with high-risk populations have not received HCV training.
- Implementing mandatory HCV training for individuals who regularly interact with high-risk populations may benefit the community overall.
- Limitations included: small sample size, particularly in the number of tattoo artists (n=4); survey was not based on a previously validated instrument.
- Further research may evaluate any changes in screening rates as a result of this outreach approach and also target additional high-risk populations (e.g. elderly, veterans, homeless).

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References