

# HEPATITIS C: DOESN'T HAVE TO BE PROVIDING EFFECTIVE CARE

Aboriginal Medical Service Western Sydney

- Jenny James
- Aboriginal Medical Service Western Sydney
- Harm Minimisation forum AHMRC June 2015



Aboriginal Medical Service  
Western Sydney



# HEP C TREATMENT OCCURS WITHIN AMSWS

3 common models of care

AMSWS: integrated holistic care

Advantages:

- ✱ Better integration of health care
- ✱ Decreased stigma
- ✱ Can help widen focus of patients' goals
- ✱ Chance to build community contacts
- ✱ Continuity of care building trusted relationship with GP, AHW, RN, Specialist







# Patient journey: assessment to treatment

- ✱ Starting point: community education about Hep C: culturally appropriate forums, workshops, health promotion
- ✱ Identification of HCV via 3 pathways
- ✱ Assessment and support: Treatment or not ready



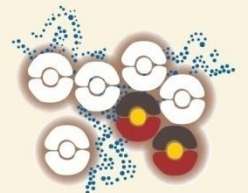


# Patient journey: assessment to treatment

## ✿ Not ready for treatment:

- multidisciplinary health care continued
- harm minimisation
- reassess again for treatment at later a date

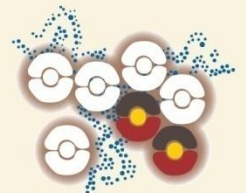
## ✿ Ready for treatment





# AMSWS HEP C TREATMENT CLINIC

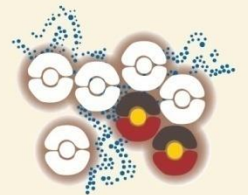
- All visits at AMSWS
- Patient's team members
- Assessment: information, fibroscan.
- Local pharmacy pickup of medications
- Oversight of treatment





# AMSWS HEP C TREATMENT CLINIC

- Maximising communication and teamwork at AMSWS
- Linking externally: hospital liver clinic counselling and/or AOD worker support & OST dosing clinics







# TREATMENT SUCCESSES & CHALLENGES

- Began Nov 2013
- Approx. 2 newly referred patients see CNC each month
- 3 patients have cleared virus following treatment
- 3 patients in followup phase ?cleared virus
- 5 patients did not complete treatment as could not tolerate side effects of interferon
- 1 patient on compassionate access scheme Westmead hospital
- 1 patient on clinical trial treatment of oral only therapy at Nepean successfully cleared virus





# QUESTIONS?



Aboriginal Medical Service  
Western Sydney