



CANCER PREVENTION & RESEARCH INSTITUTE OF TEXAS

Award ID:
PP180091

Project Title:
STOP-HCC Expansion Grant

Award Mechanism:
Expansion of Cancer Prevention Services to Rural and Medically
Underserved Populations

Principal Investigator:
Jain, Mamta

Entity:
The University of Texas Southwestern Medical Center

Lay Summary:

Need: Hepatocellular cancer (HCC) is the fastest growing cancer in Texas. The age-adjusted incidence of liver cancer in Texas is the highest in the U.S. The majority of HCC is due to viral hepatitis, primarily hepatitis C (HCV) in the US and hepatitis B virus (HBV) globally. HCV is curable and HBV is a vaccine-preventable disease. To reduce HCC burden, we are targeting counties in North, South and West Texas with high HCC incidence and significant need to increase prevention through HCV and HBV screening, immunization, and treatment. A robust primary care-based HCV screening program for baby boomers (BBs; born 1945-65) and HBV/HCV case finding other high risk groups based on national and expert guidelines is needed identify patients who need to be treated to reduce the risk of HCC. In the community, HBV screening and vaccination in high-risk groups is needed to reduce HCC risk. This program especially targets minority, low income populations with a disproportionate need for HCC prevention and poor access to HCV and HBV screening and treatment.

Overall Project Strategy: Through our current program, we dramatically increased screening of BBs using a multi-faceted intervention including: patient and provider education; electronic medical record redesign with alerts for eligibility; performance monitoring and feedback, patient navigation; and treatment/cure of HCV in Dallas County and South Texas. We have the requisite experience and expertise to improve performance at our current sites and to expand to additional healthcare systems and the community. While we have significantly improved HCV screening rates at our current sites, we see important opportunities for improvement and expansion. In four large federally qualified health centers in South Texas, we will use evidence-based quality improvement (EBQI) methods to optimize HCV screening rates in BBs and expand prevention by testing patients with abnormal liver function tests (LFTs) for HCV/HBV. In Dallas County, we will use a population-based mailed outreach program to engaged unscreened BBs with HCV screening, modeled after an effective colon cancer and HCC screening program. We are expanding BB screening to El Paso in a community-based healthcare system with >300 HCC cases over the last 5 years. For all locations, we developing navigation for patients with chronic HCV to curative HCV therapy, either by a hepatologist or by primary care clinicians with specialist support. Lastly, we will partner with a community-based program screening immigrant and other high-risk groups for HBV and HCV to provide resources to offer immunizations and link patients with chronic

infection to care.

The specific goals of our STOP-HCC expansion grant are:

1. Improve performance of existing BB HCV screening programs and add new components to increase HCV screening rates.
2. Increase number of HCV+ persons treated and cured through implementation of personalized patient navigation.
3. Expand community-based testing and immunization for HBV among high-risk persons.

Innovation: Our program will reduce the incidence of HCC using several innovative approaches:

- 1) academic-primary care partnerships to further improve BB screening in low income minority patients using EBQI methods;
- 2) expanding HCV/HBV case finding to persons at risk because of abnormal LFTs. 2) population-based mailed outreach for HCV screening to unscreened BBs;
- 3) integration of BB screening in regions at high risk of HCC, and 3) leveraging a community-based program to expand HBV screening, HBV vaccination, and treatment with anti-viral medications for immigrant populations.

Significance and Impact: Our project involves primary care practices located in 18 counties in West Texas, North Texas and South Texas, representing >25% of all new HCC cases in Texas. It is clear that HCC prevention must be a top priority given its rising incidence and mortality, especially in low income, minority populations at increased risk of viral hepatitis and HCC. This program will offer valuable models of expanding prevention through rigorous primary care-based and community based HCV and HBV screening programs, HBV immunization, and treatment of HCV and HBV to those who with chronic infection.