

141 HEPATITIS C REFERRAL IN PORTUGAL - ATTITUDES AND PRACTICES OF THE PORTUGUESE GENERAL PRACTITIONERS

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Background and Aims: General Practitioners (GPs) are the main referral source of patients with chronic hepatitis C (CHC) to a specialty appointment. However, it is not known how acquainted GPs are with this diagnosis and what criteria are used for referral. We aimed to evaluate attitudes and practices of the Portuguese GPs related to screening, diagnosis and referral of CHC patients. **Methods:** A stratified sample of 400 GPs from Portuguese Public General Health Centers and Family Health Units were invited to participate in a semi-structured telephone interview, between March and April 2013.

Descriptive data are reported. Results: Hepatitis (63%), drug-related (47%) and alcoholism (45%) were the main causes GPs consider when facing patients with elevated aminotransferases (EA). When asked about what possible viral infections, 45% would consider hepatitis C as the first possibility. Risk factors (RF) associated with higher risk of CHC were: drug abuse (79%); blood transfusion (33%) and unprotected sex (33%). In patients presenting unexplained EA, 80% of the GPs would ask for further investigation, independently of existing CHC RF. In patients presenting unexplained EA and RF, 39% would refer to a specialist. 98% of the physicians affirmed asking the HCV antibody for all patients with EA and RF; with normal aminotransferases but RF presence it drops to 83% and, with EA and no RF only 70%. Facing a patient with a positive HCV antibody, 61% of GPs would not ask for hepatitis C virus (HCV) viral load; instead they would refer to a specialist. When a viral load is requested, if patients are HCV antibody positive and have a positive or unknown viral load, 97% refer to a specialist; if viral load is negative, 65% still consider referral. **Conclusions:** There is evidence of a good awareness of GPs regarding HCV infection, and attitudes are mostly correct.

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