

Liver Cancer Task Force: Progress Report Jan 2018

OVERALL GOAL

The Liver Cancer Task Force aims to reduce the morbidity and mortality burden of liver cancer in San Francisco by working collaboratively with member organizations to reduce the health impact of viral Hepatitis B and C and other liver cancer risk factors as well as establish earlier diagnosis and treatment of liver cancer. The Task Force promotes prevention of Hepatitis B through vaccination against Hepatitis B, safe sex, and clean-needle use. They are working towards earlier detection of hepatitis B and C through the increase in blood screening tests. They are also working towards improved monitoring and treatment for people infected with Hepatitis B and C, as well as improved access to care for patients with liver cancer.

ACTIVITIES YR01

The Liver Cancer Task Force is led by Dr. Tung Nguyen and Dr. Rena Fox from UCSF and includes representatives from the following organizations: SFPDPH, UCSF, Kaiser Permanente-San Francisco, California Pacific Medical Center/Sutter Health, Zuckerberg San Francisco General Hospital (ZSFGH)/Community Health Network, Chinese Hospital, Northeast Medical Center, Dignity Health, Veterans Affairs Medical Center, American Cancer Society (ACS), San Francisco Hep B Free, End Hep C SF, and Project Inform. The task force, which meets monthly, has identified strategies and opportunities to reduce the health impact of Hepatitis B and C and other risk factors for liver cancer as well as achieve earlier diagnosis and treatment of liver cancer.

The Task Force supported two local community-based organizations focused on hepatitis (End Hep C SF and SF Hep B Free) in order to increase their scope and impact. End Hep C SF is a multi-sector collective impact initiative that utilizes evidence-based practices, community wisdom, and the creative leveraging of resources to work toward the elimination of hepatitis C in SF. During the past year, the Liver Cancer Task Force supported their monthly planning processes, creation of a website, development of a strategic plan, and provided writing support for a grant. SF Hep B Free has been working in San Francisco since 2007 to promote hepatitis B testing among Asian Americans through media and community outreach and provision of free hepatitis B testing. Over the past year, with support from the Liver Cancer Task Force, SF Hep B Free has translated their website into Chinese and created a bilingual (English/Chinese) phone line navigation program to answer people's questions about hepatitis B and to help them obtain appropriate care. The phone line navigation program was promoted through public service announcements and advertisements in various media outlets including KTSF, Bay Voice radio, and Sing Tao newspaper.

The Liver Cancer Task Force has also been active this past year in activities related to improving access to care for liver cancer patients. They have arranged teleconference participation by UCSF hepatobiliary

oncologists and radiation oncologists in a monthly ZSFGH Liver Tumor Board. They have also established a monthly email circulation of active liver cancer clinical trials at SF CAN sites (CPMC, Kaiser SF, UCSF, ZSFGH) and tracked both clinical trial consents and enrollments for UCSF Liver Cancer clinical trials. There has been a significant increase in enrollment in the past year as compared with the previous year, both overall and from SF CAN sites in particular (Table 1).

Table 1. Consents and Enrollments for UCSF Liver Cancer Clinical Trials

Year	Total Consented to UCSF HB Trials	Total Treated on UCSF HB Trials	SF CAN Site Patients Consented to UCSF HB Trials	Referral Site (for consented patients)	SF CAN Site Patients Treated on UCSF HB Trials
3/1/15-2/29/16	30	20	10	CPMC/Sutter n=2 Kaiser n = 7 ZSFGH n=1	5
3/1/16-2/28/17	76	52	25	CPMC/Sutter n=3 Kaiser n=19 ZSFGH n=3	13

OBSTACLES

The Liver Cancer Task Force deferred several activities that were originally scheduled to occur in Year 1 of the project. They originally aimed to support expanded hours for liver cancer screening at ZSFGH. They helped the radiology department create a plan for weekend screening, but they were unable to identify a sufficient number of staff members at ZSFGH to implement these weekend screening hours, so this activity was deferred.

The Task Force also worked with the Project Inform Policy team to analyze policy needs at the city, state, and federal levels that might help to reduce the liver cancer burden. Areas for concern included reimbursement for hepatitis C medications, hepatitis B vaccination, hepatitis B treatment coverage, and liver cancer screening coverage. In addition, they had plans to develop a white paper to cover some of these issues. Due to competing priorities of the lead partner organization, Project Inform, this activity was deferred to Year 2 of the project.

A few additional lower priority activities were deferred due to a lack of resources and personnel, including plans to educate oncologists and hepatologists on appropriate liver cancer treatment and liver disease care and plans to develop healthcare provider education interventions for Hepatitis B and C management.

GOALS FOR YR02

In Year 2 of SF CAN, the Liver Cancer Task Force will continue to collaborate with and support SF Hep B Free and End Hep C SF as well as work towards expanding access to liver cancer clinical trials. They will conduct policy analysis and explore ways to impact policies regarding hepatitis B vaccination for at-risk adults and reimbursement for HBV and HCV treatment.

The Liver Cancer Task Force also proposes to include two new activities that are designed to provide more in-depth understanding of the factors affecting the clinical care of patients once they have been diagnosed with viral hepatitis. These activities are complementary to the already existing efforts of SF Hep B Free and End Hep C SF to increase screening for those conditions.

- 1) The Task Force plans to work with the SFDPH Enhanced Surveillance Program to collect, manage, analyze, and summarize enhanced surveillance data on newly reported HBV and HCV cases throughout San Francisco to both help inform and assist the Liver Cancer Task Force in addressing liver cancer disparities across the entire San Francisco population. In Years 2 and 3, the Surveillance Program will randomly sample persons newly reported to SFDPH with markers of (1) HCV that meet CDC criteria for lab confirmation of HCV infection, past or present, and (2) HBV who newly meet CDC criteria for lab confirmed chronic HBV. Follow-up on the randomly selected HBV and HCV cases will be conducted using a short case investigation form, which will be faxed to the clinician who ordered the respective test. Patient data collected will include the following: age, gender, race/ethnicity, zip code, place of birth, primary language, marital status, referral to liver/GI specialist, treatment for HBV or HCV, hepatitis A (HAV) status, HAV and HBV vaccination status, alcohol consumption, and liver cancer screening.

- 2) The Task Force also plans to work with Dr. Rena Fox, a UCSF liver cancer expert who works in both General Medicine and Hepatology, to identify all currently diagnosed UCSF HCV and HBV patients to create a panel for retrospective descriptive analysis and prospective observational study. They will collect sociodemographic, health care utilization, and clinical data including liver cancer cases, stage at diagnosis, method of diagnosis, and clinical outcome. They will also assess utilization of recommended diagnostic and monitoring tests for HCV and HBV, appropriate treatment for HCV and HBV and why those who were eligible have not been treated, HAV and HBV vaccinations among eligible patients, and liver cancer screening. UCSF is one of the largest healthcare providers in San Francisco. Understanding the quality of care provided to patients with viral hepatitis will enable the Task Force to identify problematic areas and create quality improvement projects in order to reduce the incidence of liver cancer.