PROJECT INFORMATION

September 2018

Comparing Ways to Increase Hepatitis B and C Screening among Asian Americans

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What was the research about?

Infection with hepatitis B and C viruses increases the risk of liver disease and liver cancer. Treatment can slow hepatitis B and cure hepatitis C. But many people don't know they have the viruses. Asian Americans have a high risk for both viruses and get liver cancer three times as often as white people.

In this study, the research team compared two ways to increase screening for these viruses among Asian Americans. The first was to give doctors a list of patients who need screening. All doctors in the study got this list. The second was to give patients a mobile app that teaches them about hepatitis and prepares them to ask their doctors about screening. In this study, half the patients used the hepatitis app while waiting for their doctors' visit. The other patients used an app with general health information.

What were the results?

Compared with patients who used the general health app, those who used the hepatitis app were more likely to

- Report talking to their doctors about hepatitis B and C.
- Say their doctors recommended getting tested.
- Get a test for hepatitis B or C.

Doctors were more likely to order tests for hepatitis B or C for patients who used the hepatitis app than for those who used the general health app.

Using the hepatitis app didn't change how much people knew about the viruses or whether they said they were aware of hepatitis.

Who was in the study?

The study included 189 primary care doctors and 452 patients. All patients were Asian American, and 80 percent were born outside the United States. The average age of patients was 57, and 64 percent were women.

What did the research team do?

The research team developed an app that would teach patients about hepatitis B and C and ask patients about their risk for the viruses. The app included printed information that patients could take to their doctors. Patients could view the app in English, Cantonese, Mandarin, and Vietnamese.

All doctors in the study got a list of patients who hadn't had hepatitis B tests. The research team then assigned doctors to one of the two groups by chance. Patients of doctors in the first group got the hepatitis app on a tablet when they came for a clinic visit. Patients in the other group got the general health app. The team followed up with patients directly after their appointments to find out if they had talked to their doctors about hepatitis testing and if their doctors had recommended or ordered testing. Three months later, the research team asked whether the patients had a referral for testing or were tested. The team also surveyed patients about their knowledge of hepatitis.

Local hepatitis organizations, Asian health groups, patients, clinic staff, and doctors helped plan the research and develop the hepatitis app.

What were the limits of the study?

Patients in this study said that even before using the app, they felt comfortable asking their doctors about hepatitis. Results might differ for people who don't feel that way. The study took place in one city with a large Asian American population. Results may differ in other parts of the country. Doctors in this study see an average of 17 patients per week. Results may differ for doctors who see more patients.

Future research could focus on testing similar apps for other health problems and different patient populations.

How can people use the results?

Doctors' offices can consider using a mobile app like the one in this study to increase screening for hepatitis among Asian American patients.

To learn more about this project, visit www.pcori.org/Nguyen159.