Liver Disease

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News from Lourdes Health System

Specialty Clinic + Specialty Pharmacy Best for HepC Treatment

Hepatitis C infection has become a much more significant public health issue at the same time that it has become a curable disease. New drugs with increasing effectiveness and tolerance make it possible to eradicate the infection in millions of carriers. To bring this care and cure to so many who need it, Lourdes has launched a dedicated, accessible hepatitis C clinic.

“As many as one in 30 baby boomers has hepatitis C,” said Hisham ElGenaidi, MD, medical director of hepatology at Our Lady of Lourdes Medical Center. “Drug options to treat this virus are many and can be complex. Navigating the authorization process and affording co-payments can also be a challenge. For these reasons, we have partnered with a specialty pharmacy that is located onsite. This helps to expedite access to these drugs for our patients.”

Everything Onsite for Each Patient’s Clinical Plan

The Hepatitis C Clinic, opened this past fall at Our Lady of Lourdes Medical Center, streamlines services to this growing patient population. Located on the first floor of the hospital, the clinic offers comprehensive evaluation, diagnosis and treatment for patients with all phases of hepatitis C infection.

Patients at the clinic can receive lab testing on site, including for viral load and viral genotype. They can also undergo liver fibrosis staging using the new Fibroscan device, which measures the stiffness and elasticity of the liver without invasive biopsy. Knowing the viral variety (genotype 1 through 6) and the fibrosis staging is essential for selecting the correct drug regimen.

Stopping and Even Reversing Liver Damage

“The new direct-acting anti-virals can cure the disease in as little as eight weeks in some patients, and the expected cure rates can be as high as 98 percent. We see regression of fibrosis and even cirrhosis, in most patients treated,” said Dr. ElGenaidi, who leads the clinic and works closely with the in-hospital pharmacy at Lourdes (see page 2). (However, if a woman who is positive for hepatitis C becomes pregnant, she can pass the infection to her newborn, but she cannot receive anti-virals during pregnancy. The prevalence of maternal hepatitis C infection has risen significantly in the past five years).

Hepatitis C infection is the leading cause of liver transplants and liver cancer. But high cure rates with new medications that can reverse liver damage should reduce the need for transplants in these patients. The new medications also make hepatitis-C-positive donor livers useable, when followed by post-transplant drug treatment.

“In addition, we can offer these safe new anti-viral drug therapies to patients who are awaiting transplant,” said Dr. ElGenaidi.

The Lourdes Hepatitis C Clinic is currently open once a week, Mondays, 9 a.m. to 5 p.m. Call 856-796-9340 for more information.
One-to-One Relationship with Pharmacy Improves Experience and Outcomes for Hep C

Lourdes has designed a special asset for patients of its liver service: an on-site specialty pharmacy that partners with its Hepatitis C Clinic. The in-hospital pharmacy also has an in-depth focus on drug regimens for liver transplant patients. The pharmacy staff meets with each clinic patient at the time of the initial visit, maintains a schedule of calls or visits with patients and participates in the clinic’s weekly case conference.

Whether their drugs are dispensed from the Lourdes retail pharmacy or through another pharmacy of their choice, each patient receives education about their medications, support to work through challenges and reinforcement of safety instructions and medication adherence. The staff provides the administrative work-up to assist with the insurance authorization process for anti-viral drugs. Appeals are sometimes necessary, but the Lourdes pharmacists can gain approval for most patients. Even with coverage, patients may have large co-pays, and some patients have no insurance. The staff can help in identifying sources and supplemental financial support for these expensive drugs. The new agents must be taken completely and exactly as directed for a viable cure—requiring medication case management through the end of the drug cycle.

“Individual support is vital to successful treatment for hepatitis C—a curable disease that is otherwise often fatal, without drug therapy,” said Lourdes hepatologist Ashraf Malek, MD. “Partnership between an experienced, knowledgeable specialty pharmacy and liver specialist can really make the difference.”

Transplant pharmacy follows a similar model for liver patients, helping transplant recipients take advantage, for example, of the latest anti-rejection drugs, which are designed to reduce pill burden, need for monitoring and side effects (in part through extended-release formulas). The in-hospital liver transplant pharmacist can explain and deliver the drug regimen at the bedside and before discharge.

Pharmacy-based knowledge may again be needed to help transplant patients access medications and the resources for paying for them—all arrangements that should be in place, of course, before the end of hospitalization to prevent readmission. Check-ins with the pharmacy must continue as the patient recovers as an outpatient and gets further into the post-transplant period—the after-hospital time when anti-rejection effects must be balanced against the risk of infection. Medication needs for liver transplant patients may change, with prompt adjustment sometimes necessary to help avoid hospital visits.

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