# Country Case Study: Spain

EuroTEST
Working together for integrated testing and earlier care
*Addressing Hepatitis, HIV, STIs and TB*

# From Screening to Care - Coordinating Hepatologist

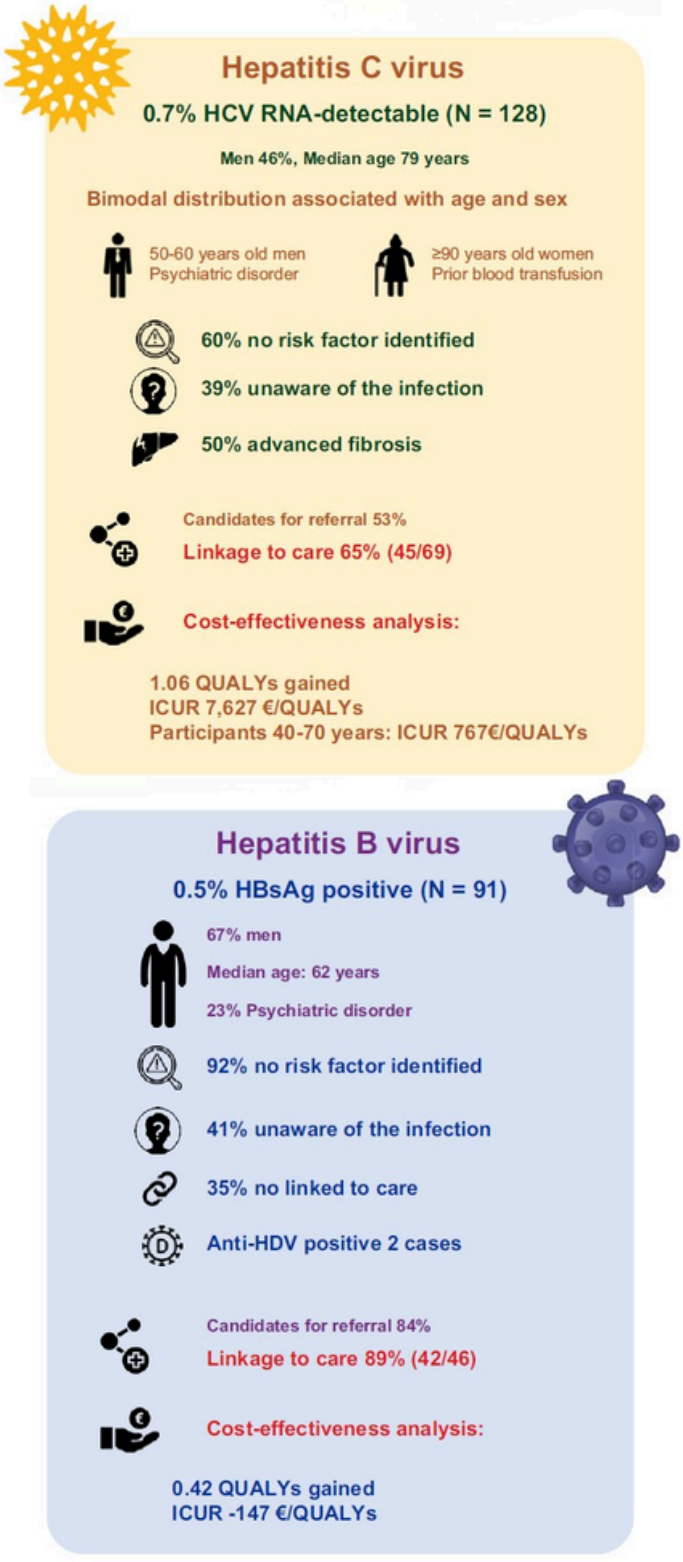
## Overview

This case study from Hospital Universitari Vall d'Hebron in Barcelona in Spain evaluated an integrated viral hepatitis screening and linkage-to-care programme among emergency department patients requiring a blood test. The prevalence of both hepatitis B and hepatitis C was approximately three times higher than that reported in the general Spanish population.

Notably, most individuals diagnosed with viral hepatitis did not report any known risk factors. These findings suggest that risk-based screening alone may fail to identify a substantial proportion of infected individuals and support the value of routine screening approaches.

## Approach

- HBV and HCV screening was integrated into the ED workflow and all individuals aged >18 requiring a blood test was offered hepatitis B and C testing.
- HCV antibodies and HBsAg were analysed using the same ED blood sample unless testing had been performed within the previous 3 months.
- Positive results were reviewed and validated by a hepatologist, who coordinated patient follow-up and referral to specialist care.
- Clinical records of patients with detectable HCV RNA or HBsAg were assessed to evaluate their clinical and social circumstances and guide management.
- Eligible patients were referred for specialist consultation, and those meeting treatment criteria were offered therapy at their first visit to minimise loss to follow-up.




From: Llaneras J et al. Integrating viral hepatitis management into the emergency department: A further step towards viral hepatitis elimination. JHEP Reports. 2024;6(1):100932

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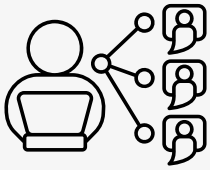
## Lessons learned

In-hospital screening allows retrieval of medical records to help determine whether patients should be referred to a specialist.



Having a hepatologist act as the screening coordinator was considered a key factor in facilitating fast and simple linkage to care. This ensured that positive results didn't just remain within the usual testing cascade but were reviewed and followed up to the most appropriate care pathway

ED-based viral hepatitis screening was shown to be cost-effective for HCV and cost-saving for HBV, supporting its inclusion as part of broader hepatitis elimination strategies.

The programme has continued and been consolidated into routine clinical practice, with ongoing follow-up and data collection supporting continuous evaluation. This demonstrates a sustained institutional commitment and feasibility of maintaining ED-based viral hepatitis screening in a real-world setting.

## Source

Llaneras J, Ruiz-Cobo JC, Rando-Segura A, Barreira-Díaz A, Domínguez-Hernández R, Rodríguez-Frías F, Campins M, Colom J, Casado MA, Blanco-Grau A, Bañares J, Monforte A, Falcó-Roget A, Ruíz L, Meza B, Pumarola T, Riveiro-Barciela M, Esteban R, Buti M. Integrating viral hepatitis management into the emergency department: A further step towards viral hepatitis elimination. JHEP Rep. 2023 Oct 12;6(1):100932. doi: 10.1016/j.jhepr.2023.100932. PMID: 38074506; PMCID: PMC10698271.

## Interview with case study author

Please find below QR code for interview with study author, Jordi Llaneras, emergency physicians at Hospital Universitari Vall d'Hebron.