

Introduction

The number of patients with significant liver disease has steadily increased over the past 20 years, predominately due to an increase in alcohol use and the rising trend of obesity. In 2018, our Trust introduced intelligent Liver Function Testing (iLFT), an automated reflexive system designed to improve early diagnosis of liver disease. The inclusion of serum based fibrosis scores allows appropriate referral to secondary care services. Since 2018 the number of referrals to the liver clinic had increased and with the effect of the Covid-19 pandemic, the waiting times for routine referrals had reached 130 weeks.

Methods

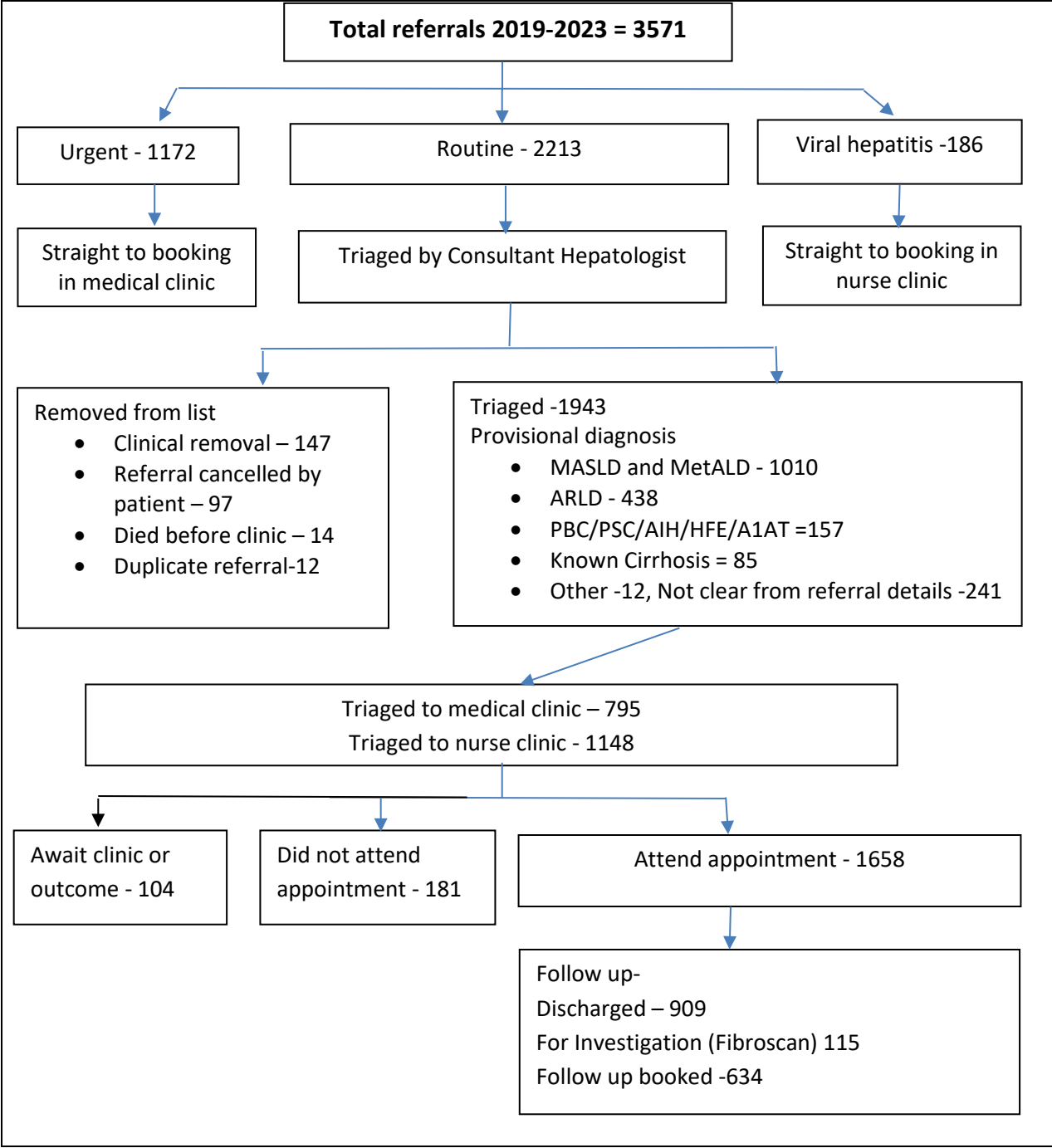
The Team introduced a new pathway to reduce waiting times and provide a better service to our patients. This included setting up a local database. Consultant Hepatologists triaged all routine referrals. iLFT and enhanced liver fibrosis (ELF) blood tests were used to remove those who could be managed in the community. Patients were assigned to either a medical or nursing clinic. New one-stop liver clinics, which included Fibroscans were created. Discharge protocols were agreed by the team.

Results

There were 3571 referrals. (See flow chart). 2213 routine referrals were placed on a list for triage. 270 were removed from list including 147 who had low fibrosis scores. 1448 (74.5%) had a provisional diagnosis related to alcohol and/or steatosis. 1114 (59%) were assigned to Specialist Nurse Clinic. 1658 (90.1%) attended their clinic appointment and of those 909 (54.8%) were provided with health education and discharged after one visit. Waiting times from October 23 has come down to less than 12 weeks.

Conclusions:

The implementation of this new pathway has been successful in significantly reducing waiting times. The attendance and discharge rate is similar in both clinics. Because most patients come to clinic with a full liver screen, have a provisional diagnosis, and often have a Fibroscan performed, we are now able to discharge 54.8% after one clinic visit. The Hepatology team has reshaped our service to work more effectively. New technology provides us with a full liver screen and portable Fibroscans are now available at most clinics.



Total referrals 2019-2023 = 3571

Urgent - 1172

Routine - 2213

Viral hepatitis -186

Straight to booking in medical clinic

Triaged by Consultant Hepatologist

Straight to booking in nurse clinic

Removed from list

- Clinical removal – 147
- Referral cancelled by patient – 97
- Died before clinic – 14
- Duplicate referral-12

Triaged -1943

Provisional diagnosis

- MASLD and MetALD - 1010
- ARLD - 438
- PBC/PSC/AIH/HFE/A1AT =157
- Known Cirrhosis = 85
- Other -12, Not clear from referral details -241

Triaged to medical clinic – 795

Triaged to nurse clinic - 1148

Await clinic or outcome - 104

Did not attend appointment - 181

Attend appointment - 1658

Follow up-
Discharged – 909
For Investigation (Fibroscan) 115
Follow up booked -634