

**AUSTRALIAN NATIONAL GUIDELINES FOR THE MANAGEMENT OF  
HEALTHCARE WORKERS LIVING WITH BLOOD BORNE VIRUSES  
AND HEALTHCARE WORKERS WHO PERFORM EXPOSURE PRONE  
PROCEDURES AT RISK OF EXPOSURE TO BLOOD BORNE VIRUSES  
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**Australian Government**  
**Department of Health and Ageing**

**AUSTRALIAN NATIONAL GUIDELINES FOR THE  
MANAGEMENT OF HEALTH CARE WORKERS  
KNOWN TO BE INFECTED WITH BLOOD-  
BORNE VIRUSES.**



Communicable  
Diseases  
network  
AUSTRALIA

# Why were the Guidelines updated?

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- Time - 2012 Guidelines
- Evidence of effectiveness of HIV antiviral treatment
- Changes in testing of blood borne viruses
- New Hepatitis C drugs

# The Guideline development

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- Large CDNA Advisory Group
- 2 rounds of public consultation
- Clear agreement on some points but not on others- balance of risks
- Regulatory aspects
- Professional standard

# So what was endorsed?

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- The Guidelines
- A short guide to exposure prone procedures
- Terms of Reference for a National Expert Reference Panel
- Communications materials

# Exposure prone procedures

- Definition of exposure prone and non exposure prone procedures

Orthopaedic	Exposure Prone	Not exposure prone
	Cutting or fixation of bones or the distant transfer of tissues from a second site (such as in a thumb reconstruction),	Closed fracture reduction
	Open procedures where there is the possibility of:	Diagnostic Arthroscopy
	<ul style="list-style-type: none"> <li>• bone fragments and/or bone spicules,</li> <li>• mechanical drilling involved</li> <li>• Deep tunnelling using sharp instruments</li> </ul>	Endoscopic Carpal tunnel decompression

# What's in the Guidelines?

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- Part A - Guidelines for health care workers and treating doctors
- Summary at the front
- Separate section for each blood borne virus
- Part B – Guidelines for public health authorities
- Includes description of roles and responsibilities
- Contact details

# What are the key messages?

- For all HCW who perform EPPs:

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  - HCW who perform EPPs must take reasonable steps to know their BBV status and then should be tested at least 3 yearly and,
  - HCW must have appropriate and timely testing after any incident of potential occupational exposure and more frequently if risk of exposure occurs in non-occupational settings.
  - HCWs who perform EPPs will be asked to confirm that they comply with the Guidelines at the time of registration, if requested by their Board



# Key messages

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- HCW who are living with a BBV can perform EPPs
  - provided they comply with these Guidelines
  - Are under the care and ongoing management of a treating doctor with relevant expertise.
- HCWs have the same right to access confidential testing, counselling and treatment as the general population.

# Key messages

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- Testing for BBVs in Australia is extremely accurate
- BBVs can be treated or controlled with antivirals
- Treatment of HIV and Hepatitis B with modern antivirals can suppress viral load and so reduce the very low transmission risk even further and reduces the risk of clinical progression
- Treatment of Hepatitis C with modern antivirals is associated with very high cure rates

# What's next?

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- Information sheets for a wide range of health professionals and the public are being finalised
- Once finalised publication on the CDNA page of the Department of Health website

# Questions?

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- Members of the CDNA Advisory Group
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