

14 November 2022

Secretariat
Clinical practice guidelines for HCC surveillance
Cancer Council Australia

Via email: liver@daffodilcentre.org

Dear Secretariat,

Re: Cancer Council Australia public consultation - Clinical practice guidelines for hepatocellular carcinoma surveillance for people at high risk in Australia 2023

The Royal Australian College of General Practitioners (RACGP) thanks Cancer Council Australia for the opportunity to respond to the public consultation on the clinical practice guidelines.

General practitioners (GPs) are the backbone of Australian healthcare with almost nine in ten Australians visiting a GP each year. The RACGP produces clinical guidelines and resources relevant for prevention and early detection of cancers in the Australian population. These guidelines, including the *Guidelines for preventive activities in general practice* (the Red Book), the *National guide to a preventive health assessment for Aboriginal and Torres Strait Islander people* (the National guide) and *Supporting smoking cessation: a guide for health professionals*, help GPs provide high-quality care and preventive activities in high risk and vulnerable populations.

We provide the following specific feedback:

1. Chosen outcomes used in the PICO questions

The stated outcomes used in the PICO questions are "liver cancer outcomes". The RACGP recommends that outcomes include quality of life, morbidity, and death. If outcomes that only focus on liver cancer are used in early-stage detection, then all patients who are over-diagnosed will appear to do very well.

2. Feasibility of monitoring with medical imaging

The draft guideline states that the prevalence of Metabolic-dysfunction fatty liver disease (MAFLD) is 37% in Australia, and these patients should be monitored with elastography, which assesses liver stiffness. This type of imaging is not widely available in Australia, it is expensive, and is not covered by a Medicare rebate if used for investigative purposes. Therefore, monitoring using elastography is not feasible within the current health care system, and if implemented without careful consideration may exacerbate health inequities.



The guideline could include further clarity around recommended diagnosis of cirrhosis (e.g. using aspartate aminotransferase-platelet ratio index (APRI) and fibrosis score based on four factors (FIB-4), or coagulation studies to consider cirrhosis progression.

3. Screening for high-risk subgroups

The RACGP recommends:

- a more intuitive order of the various high-risk subgroups. As an example, the groups could be re-ordered around major diagnoses with ethnicities being identified as additional risk modifiers.
- a specific recommendation be included for case-finding chronic HBV in high-risk ethnicities.
- further clarity for management of some additional patient groups such as in those with:
 - Combinations of viral infections.
 - Hepatitis C Virus (HCV) where treatment has been declined or is not suitable.

4. Opportunities to provide holistic care

The RACGP recommends inclusion of practice points that support holistic patient care including:

- reconsideration of antiviral treatment in those with active infection
- consideration of second line treatment for those who have failed first line HCV treatments.
- screening for hepatitis reinfection in high-risk populations such as men who have sex with men (MSM) or those who continue to use intravenous drugs.
- risk moderation advice on alcohol intake, healthy diet, appropriate age-based screening for diabetes and cardiovascular risk, hepatitis A immunisation (for MSM).

The RACGP congratulates Cancer Council Australia on producing this excellent draft guideline. If you have any queries regarding this submission, please contact Mr Stephan Groombridge, National Manager, e-Health and Quality Care on (03) 8699 0544 or at stephan.groombridge@racgp.org.au.

Yours sincerely,

Adj Prof Karen Price RACGP President ¹ The Royal Australian College of General Practitioners. General Practice: Health of the Nation 2022. East Melbourne, Vic: RACGP, 2022.