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Is education enough? An intervention to improve screening for Chagas disease at an academic safety net hospital in the US

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Abstract:

Chagas disease, caused by the parasite *Trypanosoma cruzi*, causes significant morbidity and mortality related to late-stage cardiac and other sequelae. In the United States, Chagas disease remains vastly underdiagnosed though it is prevalent among individuals originating from continental Latin America. We aimed to increase knowledge of and testing for Chagas disease at a large academic safety-net hospital in Massachusetts. An interactive, one-hour educational program was developed and disseminated from April to July 2019 in five multi-disciplinary settings (departmental Grand Rounds, clinic conferences, etc.) that addressed the need for Chagas disease screening. We tracked the number of *T. cruzi* assays ordered from March 2016 – December 2019. A total of 299 tests were ordered overall, with transplant clinicians ordering the most (n = 71, 23.7%). In the five months pre-intervention,

86 tests were ordered (46 in transplant clinic and 40 in other settings including cardiology clinic and inpatient medicine services); among 45 patients with a recorded country of origin, 16 (35.6%) were from endemic regions. In the five months post-intervention, 53 tests were ordered (1 in transplant clinic and 52 in non-transplant settings); among 24 patients with a recorded country of origin, 16 (66.7%) were from endemic regions. Overall, Chagas disease screening in non-transplant settings increased slightly post-intervention; analyses are underway to see if this change was sustained. Testing of patients from non-endemic regions was common but decreased following the intervention. The high pre-intervention rates amongst transplant clinicians might reflect the temporary hiring of a transplant ID physician (March–September 2019), suggesting that in-person reminders from a peer are effective in influencing medical practice. In summary, education is one component of a strategy to address Chagas disease but must be integrated with other interventions to realize substantive increases in screening and to ensure testing of individuals from endemic areas.

Category (Complete): Clinical Tropical Medicine

Presentation Preference (Complete): Oral

Keyword (Complete): Chagas ; education ; trypanosomiasis

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