

Compliance with faecal calprotectin home testing as standard during COVID-19 pandemic compared to laboratory-based testing pre-COVID



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BACKGROUND

- Faecal calprotectin (FC) testing has become a standard non-invasive tool to monitor disease control in inflammatory bowel disease (IBD)
- Reported patient compliance with submitting samples for hospital testing has been as low as 35%
- We aimed to evaluate patient compliance with rapid home FC testing kits compared to hospital-based testing in our university

RESULT

- Pre-home testing introduction, only 52% of the patient sample complied with FC monitoring via standard hospital laboratory testing.
- This increased to 70% compliance following the introduction of FC home-based testing kit. (Figure 1)

teaching hospital.

METHOD

- Our laboratory ceased performing FC testing in late March.
- We introduced home testing (BühlmannIBD doc)
- We randomly selected 100 patients who have been diagnosed with IBD for at least 1 year and attended IBD clinic between January 2019 and August 2020.
- 50 patients who were, pre-pandemic, requested to bring a stool sample to the laboratory for hospital-based ELISA testing
- We compared these to 50 random patients who had a home-based FC testing.
- Patients who were supplied with home testing kits received training from IBD nurses as well as on-line training materials
- Data was collated retrospectively. FCP monitoring compliance was recorded if result was documented within 6 weeks of request.

FIGURE

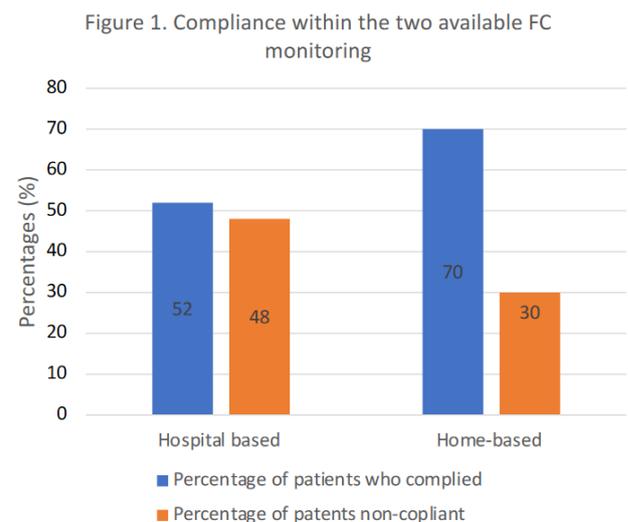


Figure 1. Comparison of percentage of compliance between hospital and home faecal calprotectin test request.

CONCLUSION

- The improvement in FC testing compliance with rapid home testing kit compared to laboratory-based testing illustrates the benefit of adapting home testing as the standard in future
- The considerable increase in compliance by home testing may be due to less disruption to patient's personal life i.e., ability to undergo testing at home, symptoms such as faecal incontinence preventing patients delivering samples to hospital and COVID pandemic compelling patients to stay at home.
- Adopting rapid FC home testing as standard provides patients with increased locus of control regarding their care, whilst also, providing healthcare professionals with rapid results, thus, will improve management of IBD.
- The ability for patients to perform home testing has obvious advantages during the Covid pandemic and following the success of this pilot we are continuing to use home testing in our practice as the pandemic recedes.