

Using the HepLOGIC tool to identify people in your practice at risk of liver cancer

SESSION DETAILS

In 2023, the first NHMRC and RACGP endorsed surveillance guidelines for liver cancer were released by Cancer Council Australia. Liver cancer is the fastest increasing cause of death in Australia and is diagnosed late with low 5-year survival compared with other cancers. The main causes of liver cancer are viral hepatitis (chronic hepatitis B and C), metabolic associated fatty liver disease and alcohol related liver disease. Liver cancer is usually preceded by cirrhosis. Cirrhosis most commonly has no symptoms until late-stage disease. Early identification of people at risk of liver disease or with cirrhosis can prevent liver cancer through treatment and or cure of viral hepatitis and lifestyle modification. Mortality from liver cancer can be prevented through regular liver cancer surveillance of at-risk groups.

In this proposed activity GPs will learn to use a liver cancer risk audit tool to identify people in their practice at highest risk of liver cancer for recall or follow-up. They will understand the antecedent factors and actions to prevent liver cancer in an at-risk population and be familiarised with the new liver cancer guidelines for surveillance of at-risk groups.

LEARNING OUTCOMES:

- list the common causes of liver cancer in the Australian population
- summarise the interventions that can prevent liver cancer and mortality in at risk populations
- discuss prevention of liver cancer risk with at risk patients
- distinguish which patients may benefit from liver cancer surveillance
- develop a plan in their practice to identify and recall people at risk of liver cancer using the liver cancer audit tool.

SPEAKERS:

[Dr Nicole Allard](#)



Activity Id: 776823



EVENT DETAILS

Date: Tuesday 19 March 2024
Time: 6.30 - 8pm
Venue: Online
Register: <https://www.emphn.org.au/news-events/events/detail/25330>
Enquiries: Josie Terron 9046 0300 or events@emphn.org.au

This event is only being offered to practices that are participating in the HepLOGIC Pilot and Feasibility Study