KNOWLEDGE DRIVES EVERYTHING

FALK FOUNDATION / BASL*/ LIVER UK 2026

INNOVATION AWARD

TEAM LEAD APPLICANT:

Dr Thendral Mangala, Consultant Gastroenterologist/ Hepatologist, North Middlesex University Hospital, Royal Free London, NHS Trust

TEAM MEMBERS:

Dr Sarina Rana IMT Gastroenterology
Ms Katie Portou, CNS Viral Hepatitis
Ms Laila Indiongco, CNS Viral Hepatitis

TEAM MENTOR:

Professor William Rosenberg, Consultant Hepatologist

TITLE OF PROJECT:

Hepatitis B Open Weekend Engagements Clinics to Improve Attendance and Outcomes

> "The award will help fund out of pocket expenses for the front-line staff who are giving up their weekends to help me to run these clinics."
>
> Dr Thendral Mangala

* British Association for the Study of the Liver

Dr Mangala explained the project:

'Hepatitis B is a viral infection mainly affecting people of ethnic minorities who, due to socioeconomic and language barriers can struggle to access healthcare. The implications of living with Hepatitis B are always difficult to explain to a patient. I have to tell them that their condition can lead to cancer, they may develop cirrhosis, or one day they may even need a transplant. I explain that it is infectious and transmitted by bodily fluids so you may give it to the person you're having sex with, or family members, or even your child. Then, after all that scary news, we explain that, unless their disease progresses, we have no treatment to offer them, apart from lifelong monitoring. They also have to live with the stigma attached to the condition.

Our hospital manages around 1,500 patients who need monitoring, mostly lifelong, presenting a significant burden for our clinics. Our current model sees patients attend hospital for a blood test and then wait, sometimes for several hours, for a brief consultant review. Usually, they will be told that everything is OK and to come back in six months and do it all again. They may have taken a day off work, spent money on childcare or travel and additional visits are needed if they are due a Fibroscan or ultrasound. They might be reluctant to ask their boss for time off because this means revealing that they have Hepatitis B, particularly as many of our patients work in jobs with little formal protection.

Perhaps then, it is not surprising that non-attendance is the biggest barrier to the effectiveness of this model. A proportion of our patients become DNAs (did not attend), often for several years at a time.

In my previous hospital we had run the occasional Sunday clinic. I had noted how much more relaxed the patients – and the staff - were in this environment and the take up was relatively high. I was also aware of new initiatives around HIV and TB monitoring, where community-based, walk-in and outreach models have improved engagement, increased testing uptake and reduced loss to follow-up.

My project aims to run weekend 'mega clinics' staffed by consultants, SpRs, phlebotomists and nurses, on a trial monthly basis starting in January 2027. Tailored around the needs of the patient, once they have received their blood test, they can choose to go home or wait to hear the result from the consultant. Either way they will receive clear follow-up pathways, including their next weekend appointment time with alternatives offered. Those due an ultrasound or Fibroscan, will be seen at the same time, reducing waiting time. We can also use this opportunity to talk to them about their weight, blood pressure and any other relevant health issue. We estimate that, as a team, we can get through around 100 patients over a day.

Initially, this project will be staffed on a purely voluntary basis, and I am delighted that many of my colleagues have already stepped up to offer their services. I hope that, in time, we will be able to put together a business case for funding from the Trust.

We believe that, by improving accessibility through flexible hours, this model will increase diagnosis rates, enhance patient engagement, and reduce health inequalities.'

Team mentor Professor Rosenberg comments:

'One of the biggest challenges for those of us who provide care for patients with Hepatitis B is that most are asymptomatic and busy getting on with their lives. Accepting invitations to attend hospital clinics is unattractive and likely to seem unnecessary. Dr Mangala and her team have tailored their service to meet the needs of their community by designing weekend engagement clinics with the aim of improving patient engagement. I believe this to be both innovative and practical and I am sure that this award will open the door to making Dr. Mangala's weekend clinics a success.'

Dr Mangala comments of winning the award:

'The numbers of Hepatitis B patients in London is disproportionately high compared to other liver diseases, yet the condition receives far less funding for monitoring than other similar status disease such as TB and HIV. I am passionate about finding a way to encourage our patients to receive effective long-term monitoring and, at the same time, to destigmatise this condition.

Winning this award is a validation that this project is worthwhile and has encouraged me to continue my work in this area.'

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