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iCARE: Insights on Competency Advancement and Recommendations for nurses managing HBV/HDV with bulevirtide – Findings from a European advisory board

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Nurses are vital clinical partners in HDV care.
iCARE supports their evolving role through shared insights and targeted training.

Introduction

- Bulevirtide (BLV) offers a promising treatment option to slow liver disease progression in patients with chronic HBV/HDV co-infection
- Its long-term, daily subcutaneous administration presents challenges for patient self-management.
- Nurses play a key role in supporting adherence, safety, and outcomes - but delivering high-quality HDV care requires specialised knowledge and skills.

Aims

- To gather insights from nurses experienced in HBV/HDV care through the **iCARE** initiative.
- To identify best practices and training needs for long-term management with BLV
- To understand the nurse's role across the HDV patient journey.

Method

- 6 nurses across 5 European countries were invited and asked to complete a written survey.
- All are working in specialised liver units and had ≥2 years' experience with HBV/HDV & some experience with BLV.
- Based on the survey's descriptive analysis results, an online European HDV Nurse Advisory Board was performed in September 2024.
- Key findings were shared with participants. The discussion focussed on the patient journey.

Fig 1: Patient journey

Results

Regional Variation in Nurse Roles

- Nurse involvement in the care pathway varies across regions, shaped by local systems and clinical structures.
- In some settings, nurses contribute to treatment decisions and provide education, care coordination, and follow-up.
- In others, the focus is primarily on these latter aspects of care.

Phase in patient journey	Key responsibilities
1 Referral/Diagnosis	Build trust and provide emotional support Engage family in care
2 Assessment and Care Plan	Evaluate treatment readiness Assess social support needs Clarify medication logistics (e.g., procurement and storage)
3 Initiation of Therapy	Teach practical skills (e.g., BLV self-injection Provide clear patient materials and tools.
4 Follow-up (FUP)	Plan and coordinate ongoing care Serve as a contact across care settings to support engagement and coordination, utilising digital tools

Table 1: Key responsibilities discussed during the European nurse advisory board focussing on the patient journey.

Optimal nursing care

- Encompasses holistic assessment, care coordination, logistical support, and patient empowerment in managing disease and treatment.

Essential skills for HDV Nursing Care

- Specialised knowledge of HBV/HDV and BLV, including treatment and side-effect management
- Building therapeutic relationships that foster trust and support.
- Person-centred communication to guide and motivate patients.
- Chronic care management skills, with a focus on adherence and long-term engagement.

Conclusions

- Liver care nurses across Europe agreed on the essential skills required to manage HDV, with local differences having minimal impact on care delivery.
- Nurses viewed themselves as clinical partners—co-pilots—supporting patients and families throughout treatment.
- **iCARE** highlights the vital role of nurses in empowering patients to manage BLV therapy and supports targeted, adaptable education across diverse healthcare settings.

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