

Common Questions About Hepatitis C Virus (HCV) Infection

What are the differences between acute, chronic, and resolved HCV infection?

Acute HCV infection implies a new infection which may or may not resolve (go away). Chronic HCV infection implies that the infection did not resolve and that the liver may suffer permanent damage. Resolved HCV infection means the viral infection has run its course or, if the patient responds to anti-viral treatment, the infection may be cleared by therapy.

If I'm HCV-infected, what are the next steps for me?

The first step is to see your doctor to determine the severity of liver damage. This may involve a liver biopsy or other tests. Decisions about treatment will be based on results of the evaluation and other factors (e.g., age, underlying medical conditions, and use of alcohol or illicit drugs).

What is the treatment for HCV infection?

Hepatitis C direct-acting antiviral agents, used alone or in combination with ribavirin and interferon, are approved for the treatment of persons with chronic hepatitis C.

Is there anything besides antiviral treatment?

Some patients with significant liver damage are candidates for a liver transplant.

Why doesn't everyone who is infected receive treatment?

The decision to treat is based on evidence of ongoing infection, results of liver evaluation, age, current use of alcohol or illicit drugs, and whether or not certain underlying medical conditions exist.

I understand that I need to avoid alcohol; what else should I avoid?

Some over-the-counter medications may be toxic to the liver. Check with your health care provider before taking any medications (prescription or over-the-counter) or supplements.

While limited, brief exposure to many chemicals and fumes is probably not hazardous, a continuous long-term exposure could affect your liver. When you inhale any chemical, your liver has the job of removing toxins from your body. Too much exposure makes your liver work harder and these chemicals may damage the liver.

How serious is HCV infection?

Many people with HCV infection will never develop symptoms. Ten to 20 percent of HCV-infected persons will go on to develop cirrhosis (scarring of the liver). Less than 5 percent will actually die of HCV. The good news is that new treatments to cure HCV are becoming available.

I'm HCV infected, but are there other reasons my ALT might be elevated?

Yes, such as alcohol consumption. A liver biopsy is useful if the ALT level is high.

How do I protect my family?

- Don't share personal items such as needles, razors for shaving, toothbrushes, etc.
- Clean up blood and blood-contaminated surfaces right away with detergent and water, followed by disinfecting with a household bleach and water solution (1/4 cup bleach in one gallon of water).
- Cover any wounds.

Is my sexual partner at risk?

There is some risk of transmitting HCV infection through sexual contact; however, this risk is low (much lower than transmission rates for HIV and hepatitis B). If you want to lower this risk, latex condoms can be used. Steady sexual partners should be offered HCV counseling and testing.

If I'm infected with HCV, should I inform future sexual partners and use a condom?

YES!

I'm pregnant or want to become pregnant soon. Will my child become infected?

Transmission of HCV can occur at birth; however, the risk is estimated to be less than 6 percent. Breastfeeding has not been shown to transmit HCV from mother to baby. A positive HCV test during a baby's first year may be only maternal antibody. Testing for HCV antibody after 1 year of age will give more accurate results.

I'm a health care worker who was recently exposed to HCV; is there post-exposure prophylaxis or a vaccine?

No. Immune globulin is not recommended for postexposure prophylaxis against HCV, and prophylactic antiviral therapy (as is done for HIV) is also not recommended. However, following

exposure, a health care worker should be tested for HCV antibody right away and at 6 months so that early HCV infection can be identified. Several studies suggest that interferon treatment begun early in the course of HCV infection is associated with a higher rate of cure; however, further studies are needed to confirm this. There is no hepatitis C vaccine.

Can I donate blood or organs for others?

No.

For more information, contact:
Minnesota Department of Health
Cross-cutting Epidemiology, Programs, and
Partnerships Section
www.health.state.mn.us/hepatitis
651-201-5414 or 1-800-676-5414