Hepatitis C
Information for Providers

What is hepatitis C?
Hepatitis C is a blood borne infection of the liver caused by the hepatitis C virus (HCV). Of individuals exposed to HCV as adults, 85% will develop chronic hepatitis C; of these, 10-20% will develop hepatic cirrhosis, putting them at risk of liver failure. Of those with chronic HCV, 1-5% will develop hepatocellular carcinoma (HCC). All adults aged 18 to 79 years should be screened, although a number of risk factors increase risk. The most important risk factor for HCV infection is past or current injection drug use. In the US, recent increases in HCV incidence have predominantly been among young persons who inject drugs (PWID).

What has VA done to treat hepatitis C?
VA is the single largest HCV care provider in the United States. Almost all Veterans with HCV in VA care are eligible for treatment as there are very few contraindications to current therapies. Therefore all Veterans with HCV should be evaluated for treatment. VA has cured over 100,000 Veterans since the availability of all oral antivirals with a cure rate of 95%.

Who should be tested for hepatitis C?
All adults aged 18 to 79 years should be screened. A number of factors increase risk and may need more regular testing:
- Using injection drugs (should be tested at least once a year, more often if possible).
- Obtaining tattoos or body-piercings in non-regulated settings
- Sharing equipment to snort drugs
- 50 or more sex partners
- Sexual exposure to HCV-infected partner
- Recent incarceration

How is hepatitis C diagnosed?
The diagnosis of chronic HCV infection is made with a positive HCV antibody test (which identifies exposure) followed by reflexive testing with hepatitis C RNA. A positive qualitative or quantitative viral load confirms chronic infection. Approximately 15-20% of those who test positive for HCV antibody may have negative HCV RNA, indicating spontaneous clearance of the virus. Chronic HCV infection is defined as an active infection with a detectable HCV viral load lasting longer than 6 months.

The positive HCV antibody test remains positive for the lifetime of the exposed individual and should not be repeated. In a patient who completed HCV treatment with a cure, a diagnosis of re-infection can be made with an HCV quantitative or qualitative RNA.

What are the symptoms of hepatitis C?
Most persons with acute or chronic HCV infection have few if any symptoms. Symptoms can range from mild to severe. The most common symptoms prior to development of end-stage liver disease include fatigue, myalgia, arthralgia, poor appetite, and nausea. Later symptoms include dark-colored urine, easy bruising or bleeding, jaundice, and fluid retention.

How is chronic hepatitis C treated?
Chronic HCV is easily cured in most individuals (including those with HIV and cirrhosis) with oral direct acting antiviral agents (DAAs). All HCV genotypes (1-6) can be cured with an 8-12 week regimen and with a 16-24 week regimen in more difficult cases. Patients with previous failure or relapses are all able to be treated. DAAs are well tolerated with occasional mild side effects including headache and fatigue.
Achievement of cure (known as sustained virologic response) is defined as an undetectable HCV virus 12 weeks after treatment completion. All patients with HCV should be evaluated by their provider and considered for HCV treatment. VA’s goal is to treat and cure all our patients with HCV.

How can hepatitis C be prevented?
Unlike hepatitis A and B, there is currently no available vaccine for HCV. The best way to prevent HCV infection is to avoid any contact with blood; not sharing needles, syringes, razors, or toothbrushes. The risk of sexually transmitted HCV infection is 3% or less among monogamous serodiscordant couples. Veterans should be counseled about limiting the number of sex partners and the consistent use of condoms with new partners and those whose HCV status is unknown. Today, the most common mode of HCV transmission is injection drug use. Patients who use injection drugs should be counseled about harm reduction strategies including referral to VA and community programs that can provide clean needles.

What other care is important for Veterans with chronic hepatitis C?
Veterans with chronic HCV infection should be offered HIV and HBV testing. Veterans without immunity to hepatitis A or B should be offered vaccination.

Resources:

Additional information and patient materials: www.hepatitis.va.gov