

FAQs about Sustained Virologic Response to Treatment for Hepatitis C

What is sustained virologic response (SVR)?

- ▶ Virologic response means that the hepatitis C virus is not detected in the blood during treatment. When the virus continues to be undetectable 12 weeks or more after completing treatment, a “sustained” virologic response (SVR) has been achieved.

Is SVR the same as “cure”?

- ▶ Yes, most likely you are cured of the infection. About 99% of people in whom the virus is no longer detected 12 weeks or more after completing treatment remain free of virus for the rest of their lives.

Can the virus return after an SVR?

- ▶ Yes, the virus can return after an SVR, but the chances are very low. Studies have shown that the virus returns in less than 1% of patients who have an SVR. In some cases, the virus returns as a result of re-infection (new infection from exposure to someone else who is infected with hepatitis C).

Is there a risk that I could pass hepatitis C to others after I have an SVR?

- ▶ Good news: the answer is no. After SVR, the hepatitis C virus is no longer in your bloodstream, so your blood cannot infect other people. However, even after SVR, you are not allowed to donate blood.

Could I get infected with hepatitis C again?

- ▶ Unfortunately, YES! If you are exposed to hepatitis C again, you can be re-infected with the hepatitis C virus.
- ▶ Risk factors that could expose you to hepatitis C when you come into contact with another person with chronic hepatitis C include: sharing needles, syringes, or other equipment to inject or snort drugs; needle stick injuries in health care settings; sharing items that may have come in contact with another person’s blood, such as razors, toothbrushes, or homemade tattoo equipment; or having unprotected sexual contact.

After SVR, what happens to my liver?

- ▶ Good things! Once SVR is achieved, additional liver damage caused from the hepatitis C virus stops. Liver enzyme tests often return to normal and liver function improves.

SVR is an important goal for preventing progression of liver disease. After SVR, there is a much lower risk of liver-related complications and death.

- ▶ SVR does not guarantee that the liver will heal from existing scarring or damage. There may still be liver-related complications if you have advanced liver scarring or cirrhosis. Talk with your provider about what further testing is recommended.
- ▶ Liver damage can continue to occur if you drink too much alcohol or if you have “fatty liver disease.”

After SVR, should my hepatitis C blood tests still be monitored?

- ▶ Yes, many providers will continue to check on your liver with blood tests for up to 12 months. If you have advanced scarring, you may be checked every 6 months or more frequently if needed. Although it is rare, there is a small possibility that the hepatitis C could return. Some providers will check for hepatitis C virus in blood at least one more time, around 6-12 months after treatment is completed.
- ▶ Even after SVR, the hepatitis C antibody test will remain positive. There is no need to recheck this antibody. The antibody will be permanently positive but the specific RNA test for the virus will be undetectable.
- ▶ Liver function blood tests may be checked periodically at the discretion of your primary care or liver provider.



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