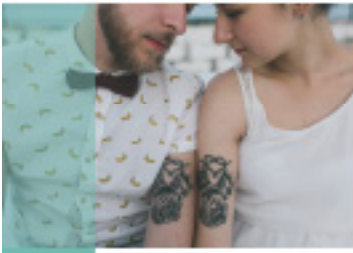


Hepatitis C



Your Liver. Your Life.

Why is the liver important?

Your liver is a vital organ that performs many essential functions. It's the largest solid organ in the body and is located under your rib cage on the upper right side. It weighs about three pounds and is shaped like a football that is flat on one side.

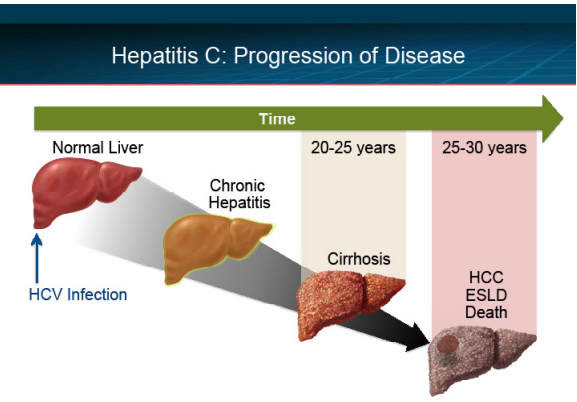


Your liver processes everything you eat, drink, breathe, and absorb through your skin. It turns nutrients into energy your body can use and removes harmful substances from your blood.

What is hepatitis C?

Hepatitis C is a disease caused by a virus that infects the liver. This virus, called the hepatitis C virus or HCV for short, is just one of the hepatitis viruses. The other common hepatitis viruses are A and B, which differ somewhat from hepatitis C in the way they are spread and treated.

How does hepatitis C affect the liver?



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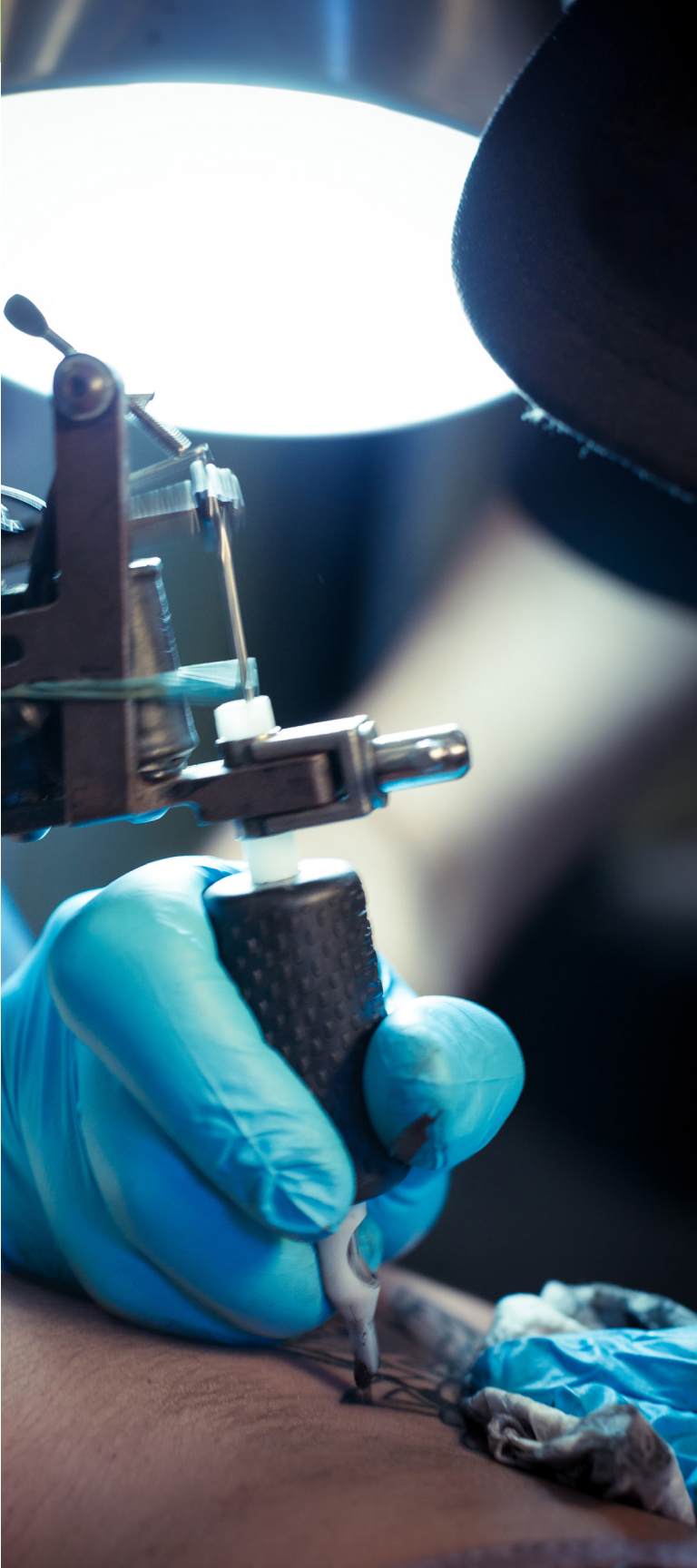
Hepatitis means inflammation, or swelling, of the liver. When the liver is inflamed, it has a harder time doing its job. Some people who get HCV have it for a short time – up to six months – and then get better on their own. This is called acute hepatitis C. But most people, about 75% – 85%, will go on to develop long-term or chronic hepatitis C, meaning it doesn't go away.

Anything that damages the liver over many years can lead the liver to form scar tissue. Fibrosis is the first stage of liver scarring. When scar tissue builds up and takes over most of the liver, this is a more serious problem called cirrhosis. Unless successfully treated with medication, chronic hepatitis C can eventually lead to cirrhosis, liver cancer and liver failure.

Who is at risk of having hepatitis C?

You have a greater risk of infection with hepatitis C if you:

- Shared needles to inject drugs (the most common way HCV is spread in the U.S.) or straws to inhale them, even once many years ago
- Were born between 1945 and 1965 (baby boomers)
- Received a blood transfusion or organ transplant before July 1992
- Received a blood product for clotting problems made before 1987
- Had tattoos or body piercings using non-sterile equipment
- Needed to have your blood filtered by a machine (hemodialysis) for a long period of time because your kidneys weren't working
- Worked in a place where you may have come into contact with infected blood, such as a healthcare institution or correctional facility
- Have HIV



Less common risks include:

- Being born to a mother with HCV (about 4 of every 100 infants born to mothers with HCV become infected)
- Having sexual contact with a HCV-infected partner
- Sharing personal care items, such as toothbrushes or razors, that came in contact with the blood of a HCV-infected person

It's worth noting that recent studies have shown an increased incidence of acute hepatitis C in young people (under 30 years old) due to an increase of injection drug use among that age group.

What are symptoms of hepatitis C?

Most people with acute or chronic HCV have no symptoms. When symptoms do occur, they may include:

- jaundice (a yellowing of the skin and whites of the eyes)
- itchy skin (pruritus)
- tiredness
- dark urine
- muscle soreness
- nausea
- loss of appetite
- stomach pain

Someone can have HCV for years or even decades without experiencing symptoms.

How is hepatitis C diagnosed?

There are two main blood tests used to diagnose hepatitis C. The Hepatitis C Antibody Test looks for antibodies (proteins made by your body's immune system to fight infection) to the hepatitis C virus; it shows if you've ever been exposed to the virus. If the antibody test is positive, another blood test will be performed to determine if you're currently infected with HCV.

This test, called an RNA Test, looks for the genetic material (RNA) of the hepatitis C virus. If the RNA test is positive, it means you currently have hepatitis C and should talk to a doctor experienced in diagnosing and treating the disease (gastroenterologist or hepatologist).

What is hepatitis C genotype?

If you currently have hepatitis C, your healthcare provider will want to know what type or "strain" of the virus you have. The different strains of HCV are referred to as genotypes. There are six major genotypes of HCV around the world: 1 (1a and 1b), 2, 3, 4, 5 and 6. In the United States, genotypes 1, 2, and 3 are most common.

- About 75% of people with HCV in the U.S. have either genotype 1a or 1b
- Between 10% - 20% of people in the U.S. have either genotype 2 or 3

Your HCV genotype does not change over time, so you only need to get tested once. Hepatitis C medications work differently for different genotypes, so knowing your genotype helps your healthcare provider choose the treatment that's best for you.

How is hepatitis C treated?

Acute Hepatitis C

The majority of people with acute HCV often don't know they have the virus and therefore do not seek treatment. However, if a person realizes they've been exposed to the virus – like a healthcare worker who gets a needle stick – an acute hepatitis C infection can be identified early and medication may be prescribed.

Doctors sometimes just recommend bed rest, drinking lots of fluids, eating a healthy diet and avoiding alcohol. It's important to see your doctor regularly for follow-up tests to make sure your body has fully recovered from the virus.

Chronic Hepatitis C

Many people already have chronic HCV when they're first diagnosed because

they were unknowingly infected many years ago. If you have chronic HCV, your healthcare provider will evaluate how well your liver is working and may order additional testing including a liver biopsy or FibroScan and imaging tests such as a CT scan, MRI, or ultrasound.

The good news is that there are now more medications available to treat HCV than ever before, making treatment regimens shorter in duration, easier to tolerate, and more effective than in the past. The purpose of using medications to treat hepatitis C is to:

- Clear the hepatitis C virus from your bloodstream
- Slow down the progression of inflammation and scarring of your liver
- Reduce the risk of developing cirrhosis and liver cancer

Based on your medical history, physical exam, lab work and other test results, your healthcare provider will suggest which medication(s) are right for you, as well as determine the length of time you need to be treated. This decision will depend upon a number of factors including:

- Your HCV genotype
- Whether or not you have cirrhosis, and if it's mild (compensated) or severe (decompensated)
- If you've received treatment before

- and which medications were used
- If you're waiting for or you've already received a liver transplant
- Other health conditions you may have

Treatment regimens are usually 12 or 24 weeks, but can vary depending on your particular circumstances. To learn more about treatment options, visit our website **www.liverfoundation.org**.

What are the potential outcomes of hepatitis C treatment?

The potential outcomes of treatment are the following:

- Sustained virologic response (SVR): You are considered cured if HCV is not detected when measured with a blood test three months after you've completed treatment. This is called a sustained virologic response and data suggest that you will stay virus free indefinitely.
- Improved response, but no SVR: The amount of HCV detected in your body is significantly lower than before treatment, but is still detectable.
- No response: The medications had minimal or no effect.
- Incomplete treatment: Treatment ended earlier than the prescribed duration.



What is the best way to stop the spread of hepatitis C?

HCV is transmitted, or spread, when blood from a hepatitis C-infected person enters the bloodstream of someone who is not infected. There is no vaccine to prevent HCV. The only way to stop the spread of HCV is to avoid direct contact with infected blood:

- Do not share needles or other drug paraphernalia (straws, filters, etc.)
- Use recommended safety measures if you are exposed to blood or needle sticks at work
- Practice safe sex
- Use clean needles and equipment for tattoos or body piercings
- Do not share razors, toothbrushes, or other personal care items with others
- Wear gloves if you have to touch someone's blood

I've been diagnosed with Hep C. What questions should I ask my healthcare provider?

Preparing a list of questions to ask your healthcare provider during an appointment can be very helpful. Some questions to ask include:

- What is my HCV genotype?
- How much hepatitis C virus do I have in my body?

- Has the virus damaged my liver?
- What are the benefits and risks of treatment?
- What treatment options are available to me?
- Which option do you think is best for me and why?
- How long will treatment last?
- What side effects will I have? How can I manage the side effects?
- How will treatment affect my daily life?
- What will the treatment cost and will my insurance cover it?
- How likely is it that I will develop cirrhosis or liver cancer?
- What else can I do to keep healthy and minimize damage to my liver?
- What prescription and over-the-counter medications or supplements should I avoid?
- Should I be vaccinated for hepatitis A and hepatitis B?
- Should my family be tested for hepatitis C?
- What is the next step?

What is the best way to manage hepatitis C?

- Adhere to your hepatitis C treatment regimen, as prescribed
- Take only those medications and supplements recommended by your doctor
- Talk to your doctor about hepatitis A and hepatitis B vaccines

- Avoid alcohol and drugs
- Eat healthy meals
- Exercise
- Rest when you feel tired
- Keep all medical and lab appointments
- See your liver specialist regularly



This is a very hopeful time for people with hepatitis C as treatment is rapidly changing for the better. With higher cure rates, shorter treatment times, and all-oral treatment regimens for most people with HCV, everyone should consider getting treated. Discuss the risks and benefits of pursuing treatment with your healthcare provider.

Facts At-A-Glance

- Hepatitis C is a liver disease caused by the hepatitis C virus (HCV).
- HCV is spread by direct contact with infected blood.
- There is no vaccine to prevent HCV.
- Most people with HCV have no symptoms.
- About 75% of people with HCV do not know they are infected with the virus.
- HCV is diagnosed by blood tests.
- Approximately 25% of people fully recover from HCV within six months after exposure and 75% of people develop long-term or chronic HCV.
- About 3.2 million Americans have chronic HCV.
- Chronic HCV can lead to cirrhosis (severe scarring) of the liver, liver cancer and liver failure.
- Chronic HCV is the leading cause for adult liver transplantation in the U.S.
- People who were born between 1945 and 1965 (baby boomers) are five times more likely to be infected with HCV.
- Stop the spread of HCV by avoiding direct contact with other people's blood: Use clean needles; wear gloves if you have to touch someone's blood; do not share toothbrushes, razors, or other personal items.
- Medications are now available that can cure most people of hepatitis C.

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Your Liver. Your Life.

American Liver Foundation

LiverFoundation.org

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