

Hepatitis C



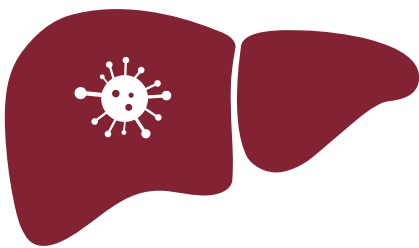
Canadian Liver Foundation
Fondation canadienne du foie

*Bringing liver research to life
Donner vie à la recherche sur le foie*

What is hepatitis C?

Hepatitis C is a liver disease caused by the hepatitis C virus (HCV). It was called non-A non-B hepatitis for most of the 1970s and 1980s until the hepatitis C virus was first identified in 1989. Hepatitis C is spread through blood-to-blood contact.

HCV is completely unrelated to either hepatitis A virus or hepatitis B virus. Although all three forms of hepatitis cause liver disease, the ways you can get these infections and the damage they cause are very different.



How does someone get hepatitis C?

Hepatitis C is spread via blood-to-blood contact. The most common means of transmission in Canada is through injection drug use, even if the drug use was many years ago or happened only once. Sharing needles or any drug-related equipment that are contaminated with the hepatitis C virus is enough to spread the infection.

In many countries in the world, hepatitis C may be spread through healthcare practices with improperly sterilized equipment, such as childhood immunization, dental work, surgery and transfusions. In Canada, the risk of getting HCV from transfusion is now extremely low because of the universal testing of all blood donors.

Activities such as tattooing and body piercing, which may be performed without sterile precautions, sharing toothbrushes and razors, or any kind of blood-to-blood contact with an infected person can also spread the hepatitis C virus. The risk of getting HCV infection through ordinary household or workplace interactions is extremely low.

Who is at risk for having hepatitis C?

People at risk for hepatitis C include the following:

- People born between 1945 and 1975; 75% of all people with hepatitis C fall into this age range.
- People who use (or have ever used, even just once) injection drugs or share drug-related equipment.
- People with tattoos and body piercings.
- People who were born or lived in countries where hepatitis C is common. These include many countries in eastern and southern Europe and the former Soviet Union, certain countries in South America, Africa, the Middle East (including Egypt), and South Asia.
- Blood transfusion recipients prior to 1992.
- People with sexual partners who have tested positive for HCV.

To assess your risk factors and determine if you need to get tested, visit liver.ca/HepatitisQuestionnaire and complete a short questionnaire.



Could I get hepatitis C from having unprotected sexual intercourse?

Although the rate of transmission through sexual contact is considered to be very low, new infections do occur from unprotected sexual contact.

Long-term couples must decide for themselves about routine condom use. They should, however, avoid unprotected intercourse during menstrual periods if the woman is HCV positive.

People with multiple sexual partners should always practise safer sex, not only to decrease the small risk of hepatitis C transmission, but to minimize the risk of acquiring other sexually transmitted infections.

People with HIV/AIDS have a higher risk of contracting hepatitis C through unprotected sex.

Can I have children or breastfeed if I have hepatitis C?

The risk of passing hepatitis C from mother to a child during birth is approximately 5%, so most newborns of mothers with HCV infection will not get the virus. Fathers who have HCV are very unlikely to pass the virus to their children.

Breastfeeding does not appear to transmit hepatitis C unless nipples are cracked or bleeding.

What are the symptoms of hepatitis C?

Most people with hepatitis C have no symptoms and may feel quite healthy. Occasionally, some people may experience a rash or joint pains.

If the liver becomes damaged, then someone might experience fatigue, jaundice (yellowing of the eyes and skin), abdominal swelling, ankle swelling, confusion and/or internal bleeding.

What happens as the disease progresses?

Most people with chronic hepatitis C feel well for many years. However, the overall lifetime risk of developing complications from chronic hepatitis C, such as cirrhosis (scarring of the liver), liver failure and liver cancer, is about 50%. In Canada, hepatitis C is the most common reason for someone to require a liver transplant.

The earlier you find out that you have hepatitis C, the more likely it is that treatment will be successful.

How do I know if I have hepatitis C?

Many people with hepatitis C are unaware they have it and can carry it unknowingly for decades. Only a blood test can detect the hepatitis C infection.

If you think you may have been exposed to HCV through use of contaminated needles or materials, blood or blood product transfusion, or another reason, you should see your healthcare provider and get tested for hepatitis C.

What happens if I test positive?

If you test positive for antibodies to HCV, your healthcare provider should do a follow-up blood test to see whether actual virus (HCV RNA) can be found in your blood, along with blood tests to check if there is inflammation or scarring in your liver.

About 25% of people infected with HCV will have a mild, brief disease and get rid of the virus completely soon after being exposed. In this case, the antibodies to HCV usually remain detectable in the blood but the actual virus does not; these individuals are cured of hepatitis C infection but are not protected from being re-infected if they are exposed to HCV again. If the virus does not disappear after six months, it is considered a chronic infection. Once chronic, unless treated, it is a lifelong infection.

Can I be cured?

Yes, you can be cured of HCV infection. Cure does not mean just suppression or control of infection but true cure.

What are the treatment options?

Since 2010, enormous progress has been made in treatment of chronic hepatitis C. New therapies called direct acting antivirals (DAAs) are pills that act on the virus itself to eradicate it from the body, unlike older medicines like interferon injections which work by stimulating the body's immune system to clear the virus. These new treatments are very effective and can achieve cure rates of over 95%. In almost all cases, there is no longer a need for interferon, which was responsible for many of the side effects previously associated with HCV treatment.

The new treatment combinations are very simple – as little as one or a few pills a day (for 8 to 24 weeks), with very few side effects. Treatment is most effective before liver damage is advanced but still may be effective at all stages of the disease.

Your primary care physician may refer you to a specialist to determine whether you are eligible for treatment. A specialist will help you decide which drug therapy is best for you based on the severity of your liver disease, the strain or genotype of the virus and whether or not you have been treated in the past.

If you are not presently eligible for treatment, it is important that you make sure to have your liver monitored at least once a year to follow the progression of the disease. You are strongly advised to have regular check-ups for your liver. Although liver failure and cancer can be the end results of this disease, your healthcare provider can identify liver changes long before this happens. Treating hepatitis C infection drastically reduces the risk of these outcomes.

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How can I live healthy with hepatitis C?

It is important for people living with hepatitis C to implement lifestyle changes, including:

- Maintain a healthy body weight;
- Eat a well-balanced, nutritious diet;
- Exercise regularly;
- Avoid alcohol;
- Get vaccinated against hepatitis A and hepatitis B.

Alcohol accelerates the liver damage caused by HCV infection worsening the scarring of the liver and the progression to liver cirrhosis. Additionally, alcohol consumption may increase the risk of developing liver cancer in some individuals with HCV infection.



Hepatitis C increases the risk of diabetes, therefore it is important to maintain a healthy lifestyle. Several studies have shown that drinking coffee (2–3 cups per day) may slow the progression of liver damage and reduce the risk of liver cancer in people who have hepatitis C infection.

No alternative therapies which include herbal remedies, homeopathic medicines, and minerals have been proven safe and effective for treatment of hepatitis C. Even “natural” products that are advertised to improve liver health can be harmful to the liver. Be sure to tell your healthcare provider what medications and alternative therapies you are taking.



How can I protect others?

If you have been diagnosed with hepatitis C, there is no need to become socially isolated, but there are common-sense precautions you should take to avoid spreading the virus:

- Do not give blood.
- Do not share razors or toothbrushes.
- If you use drugs, do not share needles or other drug-related equipment.
- Inform health professionals who care for you and may be exposed to your blood that you have hepatitis C.
- Although sexual transmission is rare, inform your sexual partner(s) that you have hepatitis C and take appropriate precautions.

Thanks to research we have tests to identify the virus and effective therapies that can cure hepatitis C; however there is no vaccine for hepatitis C prevention yet.



CANADIAN LIVER FOUNDATION

1 in 4 Canadians may be affected by liver disease, including everyone from newborn babies to older adults.

Founded in 1969 the Canadian Liver Foundation (CLF) is the only national charity in Canada focused on liver health, and the main source of non-profit funding for liver health research.

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