Hepatitis C

Summary

- Hepatitis C is a virus that causes inflammation and damage to the liver.
- Some people who live with the virus don't have many symptoms until they get older.
- In Australia, hepatitis C is spread through the sharing of unclean drug injecting equipment.
- There are new treatments, available to all people living with hepatitis C, that can clear the infection and improve their health.
- The new treatment is in tablet form, and is taken daily for 8-12 weeks. It is much easier to take than older treatments.
- You can improve overall liver health by eating a well-balanced diet, doing regular exercise, reducing stress, and reducing the amount of alcohol you drink (or avoiding alcohol altogether).
- See your doctor immediately if you have any symptoms or if you think you have been at risk of infection.

Hepatitis C is a blood-borne virus that causes inflammation (swelling and pain) of the liver. This virus is present in the blood of a person living with hepatitis C and can be spread through blood-to-blood contact.

In Australia, hepatitis C is commonly spread through sharing unsterile needles, syringes and other injecting drug equipment. It is not spread by kissing, hugging or sharing food.

Current treatment is effective for more than 95 per cent of people. Treatment clears the infection, decreases inflammation in the liver and reduces the long-term risk of health problems including chronic liver disease and liver cancer.

Treating people at risk may also prevent transmission to others. There is no vaccine to prevent hepatitis C infection.

Symptoms of hepatitis C

Many people do not feel ill when first infected with hepatitis C. Others may find their urine becomes dark and their eyes and skin turn yellow (this is known as jaundice), or they may experience a minor flu-like illness. These symptoms may disappear within a few weeks, but this does not necessarily mean that the infection has been cleared.

Twenty to 30 per cent of people who have been infected may clear the virus from their blood naturally, with no treatment, within six months. These people no longer have the hepatitis C virus and are not infectious, but will still have hepatitis C antibodies in their blood life-long.

The presence of hepatitis C antibodies shows that someone has been exposed to the virus, but does not offer any immunity against hepatitis C. People can become reinfected after clearing the virus naturally, or after treatment.

Chronic hepatitis C

Two out of every three people infected with hepatitis C do not clear the infection and continue to carry the virus in their blood for more than six months. This is called chronic hepatitis C.

Chronic hepatitis C most often does not cause any health problems until many years after infection. Symptoms of chronic hepatitis C can include:

- mild to severe tiredness
- loss of appetite
- feeling sick (nausea) and vomiting
• soreness in the upper right side of the stomach (under the ribs)
• fever
• increased moodiness and depression
• joint pain or swelling
• skin rash.

In many cases, people who have chronic hepatitis C do not feel ill.

About 15 to 20 per cent of people who have untreated chronic hepatitis C will develop severe scarring of the liver (cirrhosis). This may take 20 to 40 years, or more, to develop. A small number of people with cirrhosis may then develop liver cancer.

Spread of hepatitis C

Hepatitis C is spread through blood-to-blood contact. The most common way people become infected with hepatitis C in Australia is by sharing drug-injecting equipment such as needles, syringes, spoons and tourniquets. Some people with hepatitis C have a history of regular injecting and some people have only injected on one or a few occasions.

Hepatitis C may also be spread through:

• **tattooing** and body piercing using equipment that has not been properly cleaned, disinfected or sterilised
• **needlestick injuries** in a healthcare setting
• receiving **blood transfusions** in Australia prior to February 1990, when hepatitis C virus testing of blood donations was introduced
• unclean or unsterile medical procedures, blood transfusions or blood products and mass immunisation programs provided in a country other than Australia
• pregnancy or childbirth – there is a five per cent chance of a mother with chronic hepatitis C infection passing on the virus to her baby during pregnancy or childbirth.

Breastfeeding is safe unless nipples are cracked or bleeding.

Less likely possible routes of transmission of hepatitis C include:

• sharing toothbrushes, razor blades or other similar personal items that could have small amounts of blood on them
• one person’s blood coming into contact with open cuts on another person.
• sexual transmission – sexual transmission rates of hepatitis C are very low, however the risk is increased with certain sexual practices or circumstances where there is the possibility of blood-to-blood or anorectal fluid-to-blood contact (for example, sex during menstruation, group sex, the use of sex toys, fisting or the use of anorectal douching equipment) that can lead to tears in the mucosal membrane or exposure of open cuts or wounds on the skin to hepatitis C in anorectal fluid.

Hepatitis C cannot be transmitted by

• kissing
• sharing food, cups or cutlery
• shaking hands or day-to-day physical contact.

Preventing the spread of hepatitis C

At present, there is no vaccine available to prevent a person from being infected with hepatitis C. Recommended behaviours to prevent the spread of the virus include:

• Always use sterile (completely clean) injecting equipment.
• Avoid sharing personal items such as toothbrushes, razors, nail files or nail scissors, which can draw blood.
• If you are involved in body piercing, tattooing, electrolysis or acupuncture, always ensure that any instrument that pierces the skin is either ‘single use’ or has been cleaned, disinfected and sterilised since it was last used.
If you are a healthcare worker, follow standard precautions (infection control guidelines) at all times. Wherever possible, wear single-use gloves if you give someone first aid or clean up blood or body fluids. Although hepatitis C is not generally considered to be a sexually transmissible infection in Australia, you may wish to consider ‘safer sex’ practices (using a condom) if blood is going to be present, or if your partner has HIV infection. You may wish to further discuss this issue and personal risks with your doctor.

**Hepatitis C and injecting drugs**

If you inject drugs, *never share needles and syringes or other equipment* such as tourniquets, spoons, swabs or water.

**Always use sterile needles and syringes.** These are available free of charge from needle and syringe programs and some pharmacists. To find out where you can obtain free needles, syringes and other injecting equipment, contact DirectLine on 1800 888 236.

**Always wash your hands before and after injecting.**

**Hepatitis C and blood spills**

When cleaning and removing blood spills, use standard infection control precautions at all times:

- Cover any cuts or wounds with a waterproof dressing.
- Wear single-use gloves and use paper towel to mop up blood spills.
- Clean the area with warm water and detergent, then rinse and dry.
- Place used gloves and paper towels into a plastic bag, then seal and dispose of them in a rubbish bin.
- Wash your hands in warm, soapy water then dry them thoroughly.
- Put bloodstained tissues, sanitary towels or dressings in a plastic bag before throwing them away.

**Diagnosis of hepatitis C**

If you are at risk of hepatitis C infection, or think you may have been exposed to hepatitis C in the past, see your doctor for an assessment of your liver health. This will include blood tests and possibly a non-invasive test for liver damage (called a fibroscan).

A blood test known as a ‘hepatitis C antibody test’ can tell you whether you have been exposed to hepatitis C.

It may take two to three months (or sometimes longer) from the time of infection until a blood test can detect antibodies to hepatitis C, so there is a ‘window period’ during which you cannot tell if you are or have been infected. In this time, take precautions to prevent the potential spread of the virus.

If the hepatitis C antibody test returns a positive result, you will need to have an extra test, called ‘hepatitis C PCR’, to determine if the virus is still present in your blood or liver or if you have already cleared the infection.

The hepatitis C PCR test is recommended for anyone who has positive hepatitis C antibodies — unless they have recently completed hepatitis C treatment. If you have had treatment, antibodies will persist whether you have cleared the hepatitis C virus or not.

A liver ultrasound or fibroscan (a quick and non-invasive test that uses ultrasound to measure the ‘stiffness’ of your liver) can also be performed to assess if you have any liver damage.

If your doctor is inexperienced in diagnosing hepatitis C you can call the [Hepatitis Infoline](tel:1800 703 003) on 1800 703 003 for information, and to find a GP who can help you.

**Treatment of hepatitis C**

Hepatitis C is treated with antiviral medications that aim to clear the virus from your body.

New all-tablet (oral) treatments have greatly improved the outcomes for people with hepatitis C. These treatments can cure more than 95 per cent of individuals with chronic hepatitis C. There are several new tablets that are used in combination to treat all hepatitis C strains (genotypes). They are effective for people with no liver damage and those who have more advanced liver damage or cirrhosis.

These new tablet medications are available and subsidised on the Australian Pharmaceutical Benefits Scheme, and

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can be prescribed by specialists, general practitioners and nurse practitioners with specialist input.

For more information on the new medications for the treatment of hepatitis C, see our video: Hepatitis C Cure – what it means for Victorians.

If your doctor does not know about the new treatments, you can call the Hepatitis Infoline on 1800 703 003 for information, and to find a GP who can help you.

Talk with your doctor about treatment options and the potential for interactions with other medications, herbal preparations and other drugs.

In general, if you have hepatitis C you will feel better if you:

- Get treated and clear the virus
- Avoid drinking alcohol.
- Eat a well-balanced, low-fat diet.
- Do regular exercise (although always rest when tired).
- Consult your doctor regularly.

**Side-effects of treatment for hepatitis C**

There may be some side effects related to hepatitis C medicines, however the new tablets are generally very well tolerated. Most side effects with hepatitis C treatment have been reported by people treated with the older interferon or injection-based treatments, including mental health side effects that are not seen with the new tablet medications.

**Where to get help**

- **Your GP (doctor)**
- **Pharmacist**
  - **Hepatitis Victoria** or call the Hepatitis Infoline on 1800 703 003
    - liver clinics and liver specialists in Victoria
    - factsheets
    - questions to ask your local GP or pharmacist
- **Harm Reduction Victoria** Tel: (03) 9329 1500
- **Victorian Aboriginal Community Controlled Health Organisation**
- **Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine**
- **Multicultural Health and Support Service**, Centre for Culture, Ethnicity and Health Tel: (03) 9418 9929
- **DirectLine** Tel. 1800 888 236 – for 24-hour confidential drug and alcohol telephone counselling, information and referral (including information about where to get clean needles and syringes)
- **HIV, Hepatitis and STI Education and Resource Centre** Tel. (03) 9076 6993
- **St Vincent's Hospital, Melbourne have produced an easy to understand booklet about hepatitis C**
  which is available in English, Simplified Chinese and Vietnamese about hepatitis C.

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