

FACT SHEET for HEALTH CARE PROVIDERS:

(revised April 7, 2005)

Hepatitis C Positive Patients

Hepatitis C Virus Infection

- The anti-HCV EIA test does not distinguish between acute, chronic, or resolved infection.
 - Many unconfirmed anti-HCV tests are false positives.
 - The EIA is confirmed if the signal to cutoff ratio is ≥ 3.8 or by use of a more specific test (RIBA).
 - HCV infection can be confirmed by PCR but a single negative PCR is not necessarily confirmation of resolved infection.
 - Up to 10% of acute HCV cases will be anti-HCV negative when tested initially because some have not yet seroconverted and others (<3%) remain negative even with prolonged follow-up. PCR should be used to confirm HCV infection in these cases.
- Chronic infection occurs in 50-80% of acute infections. Chronically-infected persons are at increased risk for developing chronic liver disease and hepatocellular carcinoma.
- HCV+ persons should receive follow-up care to evaluate disease stage, liver health, and treatment eligibility. Treatment can be effective and may be appropriate for persons who meet specific criteria.
- HCV+ persons *with evidence of chronic liver disease* should be vaccinated against hepatitis A.
- HCV+ persons should not drink alcohol.
- All medications and remedies should be evaluated for safety in the patient with hepatitis C infection. Many classes can cause hepatotoxicity and if used, must be used with extreme caution. These include acetaminophen-based products, NSAIDs, lipid lowering agents, oral anti-diabetic agents, anti-fungals, anticonvulsants, anti-tuberculosis agents, and psychotropic agents.

Prevention of Transmission

- HCV+ persons should be considered infectious and counseled about preventing transmission to others. HCV+ persons should never share personal care items that could be contaminated with blood such as toothbrushes and razors. Cuts and sores should be kept covered.
- Injection drug users should never share needles, syringes, or other materials and equipment (water, cotton, cooker) used in preparing drugs for injection. Injection drug users are at increased risk for hepatitis A, B, and HIV. Hepatitis A/B vaccination and HIV testing should be considered.
- Risk of sexual transmission is very low but not absent. HCV+ persons should discuss prevention options with their sex partner(s). HCV+ persons in monogamous, long-term relationships are not recommended to change sexual practices.