

**What is Hepatitis C?**

Hepatitis C is a virus that infects the liver.

**Who is at risk for Hepatitis C?**

IV drug users, persons receiving blood products (such as transfusions) or organ transplants prior to July 1992, persons receiving clotting factors before 1987, healthcare workers, chronic hemodialysis patients, infants born to infected mothers, and persons with multiple sexual partners are at highest risk for hepatitis C.

**How do you get Hepatitis C?**

The hepatitis C virus is spread through contact with contaminated blood. It can also be spread through close household contact. The role of sexual transmission is not clear, but high-risk sexual activity (multiple partners or history of STD's) is a risk factor. It can also be transmitted from a pregnant woman to her baby. The mode of transmission is unknown in about 10% of cases.

**Can Hepatitis C be spread from person-to-person?**

Yes. Several routes have been described, but the parenteral (blood to blood) route is the most common. Sexual transmission accounts for approximately 15% of all transmission, although it is not thought to be efficiently transmitted sexually. Mother to infant transmission does occur in about 5% - 6% of infant cases. There is no evidence that hepatitis C can be transmitted by casual contact, through foods, or by coughing or sneezing. There is also no evidence of hepatitis C being transmitted through breast milk.

**What are the symptoms of Hepatitis C?**

Most people who are infected with hepatitis C do not have symptoms and lead normal lives. Infection with hepatitis C may cause mild symptoms, which usually develop slowly and may include feeling very tired, loss of appetite, stomach pain, nausea and vomiting. Jaundice (yellow skin and eyes) does not commonly occur. Rarely, hepatitis C may result in death.

**How soon do symptoms appear?**

It takes from 2 weeks to 6 months (usually 6 - 9 weeks) after exposure before symptoms appear. Only about 25% - 35% of infected persons will develop symptoms however.

**How long will symptoms last?**

Approximately two thirds of people infected with hepatitis C will continue with chronic infection and could potentially develop symptoms related to liver disease. It is estimated that approximately 20% of those people chronically infected with hepatitis C will develop cirrhosis, with the risk of liver cancer increasing to 1-4% per year once a person has cirrhosis. About 1% - 4% of HCV infected people die due to the disease.

**How is Hepatitis C diagnosed?**

Infection by the hepatitis C virus can be determined by a simple and specific blood test that detects antibodies against HCV. The antibody is insufficient to provide immunity and the test does not distinguish between acute or chronic infection. If the initial test is positive, a second test should be done to confirm the diagnosis and exclude laboratory error. A liver biopsy can determine the extent of liver damage done by the virus.

**How is Hepatitis C treated?**

At this time, long-acting pegylated interferon, or a combination of pegylated interferon with Ribavirin are being used to treat hepatitis C. Depending on the type of hepatitis C (genotype) a patient has, treatment can last from 24 - 48 weeks. Effectiveness rates vary from 50% - 80% depending on the type of hepatitis C and how well the patient is able to tolerate the treatment program.

**How can Hepatitis C be prevented?**

There is no vaccine available for hepatitis C.

- Don't share IV drug needles, syringes, water or works.
- Avoid handling or sharing anything that may have the blood of an infected person on it, such as toothbrushes, razors, straws used for cocaine, needles used for piercing or tattooing, or other personal care articles.
- If you are a healthcare worker, always follow routine barrier precautions and safely handle needles and other sharps.
- A 10% solution of household bleach is believed to kill the virus, and is recommended for the cleaning up of blood spills.