

This fact sheet is for people who have received a positive hepatitis C antibody test result and for people who want to know more about hepatitis C.

A positive test result means that you have been exposed to the hepatitis C virus. This may be a shock and you may have questions that you need answered.

One in four people exposed to hepatitis C will clear the virus. Your doctor can order more tests to find out if you are one of these four people. If further tests reveal that you do have hepatitis C, your doctor and the organisations listed on the back of this sheet can give you more information and support.

► **What is hepatitis C?**

Hepatitis C is a blood-borne virus that can damage your liver. Hepatitis C can be a chronic (long-term) condition. You may have had it for many years without experiencing any symptoms. However, common symptoms include fatigue, nausea, pain under the ribs and intolerance to fatty foods and alcohol. Unlike other hepatitis viruses, hepatitis C does not usually cause illness when you are first infected. Many people are unaware that they have been infected, even after having the virus for many years. There are at least 6 major types of hepatitis C called genotypes (numbered 1, 2, 3, 4 etc.), which are all slightly different.

► **How can you get hepatitis C?**

Hepatitis C is transmitted through blood-to-blood contact. Most people in Australia and New Zealand with hepatitis C were infected through sharing drug-injecting equipment. Transmission can also occur through unsterile tattooing or body piercing, from a needlestick injury, or from blood or blood product transfusion in Australia prior to 1990. Hepatitis C can also be spread by unsterile medical or vaccination practices in some other countries. There is a small risk of mother-to-baby transmission. The risk of transmitting hepatitis C during sexual contact is very low. There is no risk of viral transmission through sharing household utensils such as cups or plates or through sharing food.

► **Treatment**

Treatment aims to clear hepatitis C from your body and minimise damage to your liver. Not everyone needs treatment as hepatitis C is often mild and will not affect long-term health. The most effective treatment for hepatitis C is a combination course of the drugs pegylated interferon and ribavirin. **Hepatitis C treatment has advanced rapidly in the past few years and around 80% of people with some genotypes and about 50% to 60% of all people treated with current therapy clear the virus.** Some genotypes are more responsive to treatment than others. This means that many people with hepatitis C can clear the virus and become symptom free. Interferon is injected just under the skin and ribavirin is taken as a pill. Treatment is usually given for 6 to 12 months. Regular check-ups by your GP or specialist are essential during your treatment to monitor your progress and respond to any issues you may have.

► **Monitoring your health**

To find out how your body is coping with hepatitis C, you need to monitor your health. This can help in deciding whether or when to start treatment. Regular monitoring of your health can involve consultation with your local GP or specialist at a liver or hepatitis clinic, or a combination of these. It is most important to maintain a healthy diet, cut out or limit alcohol, and exercise regularly. Once a person has been exposed to hepatitis C, a hepatitis C antibody

test will usually come back positive, even after your body has cleared the virus or after successful treatment. Several tests are used to determine whether your hepatitis C has been cleared (which means you are no longer infectious and the virus is no longer damaging your liver) or whether you still have it.

► **Tests**

Liver function tests look at how your liver is performing. One of these tests is called an ALT (alanine aminotransferase) test. It indicates current liver damage. It can go up and down over time for many reasons including alcohol use, other drug use or if your body is fighting another infection. It can also fluctuate as a result of hepatitis C.

If your ALT is raised on one or more occasions, your doctor may perform a PCR (polymerase chain reaction) test to determine whether you have cleared the hepatitis C virus or whether you still have it. You may also have a genotype test, which the type of the virus you have been exposed to, and a viral load test, which measures how much virus is in your system. The genotype and viral load tests give an indication of treatment outcome. A PCR test will be repeated sometime after treatment to determine whether you have cleared the hepatitis C virus.

► **Your Doctor**

You can talk to your doctor about hepatitis C in a private and confidential manner. In NSW, ACT and Victoria, doctors participating in the HCV s100 pilot are authorised to prescribe antiviral drugs in collaboration with a specialist at a public hospital or liver clinic. The organisations listed on this sheet can help you and your doctor locate a hepatitis C treatment service.

► **Confidentiality**

Under most circumstances, you have no obligation to tell anyone that you have hepatitis C. However, there is a legal requirement to inform the Red Cross of your hepatitis C status if you are donating blood, and similarly, you must indicate your hepatitis C status to the Australian Defence Force if you are applying as an entrant. If you are a health care worker with hepatitis C you must not perform exposure prone procedures.

► **Someone to talk to**

If you have hepatitis C, it is important to ask questions and find the kind of support that suits you. Hepatitis organisations offer a range of information and services including confidential counselling and referrals. They can often put you in contact with others who have hepatitis C. You may want to do some more reading before talking to others. A list of helpful resources can be found at www.ashm.org.au/hepc and at www.hepatitisc.org.au.

Listed below are some organisations and groups that can provide you with information and support.