Frequently Asked Questions

This fact sheet covers frequently asked questions (FAQ's) about different areas of hepatitis C (HCV). For more detailed information see other HCV fact sheets in this series.

FAQs about hepatitis C

What is hepatitis C?
Hepatitis C is a liver disease caused by the hepatitis C virus, which is found in the blood of a person who has this virus. Hepatitis C is spread by contact with the blood of an infected person.

Is there a vaccine for the prevention of Hepatitis C infection?
No.

FAQs about hepatitis C testing

What blood tests are available to check for hepatitis C?
There are several blood tests that can be done to determine if you have been infected with hepatitis C. Your doctor may order just one or a combination of these tests. The following are the types of tests your doctor may order and the purpose for each:

Antibody to hepatitis C virus (Anti-HCV)

- A hepatitis C antibody (anti-HCV) blood test will look for antibodies produced in response to the hepatitis C virus (HCV).
- Antibodies are formed by our bodies in response to anything foreign that gets into our blood stream.
- An antibody test does not tell whether the infection is new (acute), chronic (long-term) or if HCV is still present.
- An antibody test can only tell if there has been exposure to the virus, it can't tell if the virus is still present.

PCR Tests (Polymerase chain reaction test)
There are 3 different PCR test used in HCV testing:

- A PCR test that is used to confirm the presence or absence of HCV is called a PCR qualitative test.
- A PCR test that is used to detect amount of virus (viral load) in the blood stream is called a PCR quantitative test.
- A PCR genotype tests that is used to determine the genotype of the virus is called a PCR genotype tests.

What is a "false positive" antibody hepatitis C test result?
A false positive test result means that the test shows a positive result in a person who in fact does not have hepatitis C. PCR testing is used for a more accurate result when false positive is suspected.

What is a "false negative" antibody hepatitis C test result?
A false negative test means that the test shows a negative result in a person who does have hepatitis C. PCR testing is used for a more accurate result when false negative is suspected. Persons with early infection may not as yet have developed antibody levels high enough that the test can measure. In addition, some persons may lack the (immune) response necessary for the test to work well enough for detection.

How long after being exposed to hepatitis C does it take to test positive with an antibody - HCV test?
It can take up to 6 months for antibodies to the virus to be detected using the HCV antibody test. This period between being infected and the production of antibodies is called the “window period”.

How long after exposure to hepatitis C does it take to test positive with a PCR test?
It is possible to detect hepatitis C within 1 to 2 weeks after being infected with the hepatitis C virus.

FAQs what happens next after testing positive

What should I do if I have a confirmed positive hepatitis C test?
There are many services and organisations that can give you information and support. Talking with people with the virus or those who are well informed will help you to understand what it means for you and help you deal with the virus. Contact your local drug user organisation for more information, (see the listing for AIVL member organisations on the AIVL website at: www.aivl.org.au*)*

What tests are done to monitor hepatitis C?
Your doctor will do tests called liver function tests (LFT’s). These tests will include an ALT (alanine aminotransferase; a liver enzyme) test which monitors the level of ALT in the blood. An elevated ALT indicates inflammation of the liver and you should be checked further for chronic (long-term) liver disease and discuss the possibility of treatment. The evaluation should be done by a healthcare professional familiar with chronic hepatitis C.

Can you have a normal liver enzyme (e.g. ALT) level and still have chronic hepatitis C?
Yes. It is common for people with chronic hepatitis C to have a liver enzyme level that goes up and down, with periodic returns to normal or near normal.

Some people can have a liver enzyme level that is normal but still have chronic liver disease. Liver enzyme tests alone are not a good indication of the level of damage to your liver. If the liver enzyme level is normal, persons should have their enzyme level re-checked several times over a 6 to 12 month period. If the liver enzyme level remains normal, your doctor may check it less frequently, such as once a year.

FAQs about hepatitis C Transmission

How long can hepatitis C live outside the body and transmit infection?
Recent studies suggest that the hepatitis C virus may survive on surfaces at room temperature for at least 16 hours, but no longer than 4 days.

What do you use to remove blood from surfaces?
Blood spills, including dried blood, can still be infectious. Clean up blood spills by washing the area with a mixture of one part household bleach to 10 parts of water. Use gloves when cleaning up any blood spills.

Can hepatitis C be transmitted by sexual activity?
While hepatitis C is not considered a sexually transmitted infection (STI), where blood is present during sex there is a risk of transmission. As with any situation where blood is present, care and precautions – such as using a condom – should be taken.

Can hepatitis C be spread by oral sex?
There is no evidence that hepatitis C can be spread by oral sex. However, in any situation where blood is present, take care and precautions (i.e. dental dams) should be used.

Can hepatitis C be spread within a household?
Household transmission is rare and can be avoided by following simple blood awareness procedures. Do not share any household items that may have blood on them including toothbrushes, brushes and combs, razors or nail clippers. Hepatitis C is not transmitted by sharing cups, plates, towels or any household items that do not contain blood. Care must be taken when any blood is present and household spills cleaned up with bleach.

Can you get hepatitis C from getting a tattoo?
Any unsafe procedure where blood is present carries the risk of hepatitis C transmission. Home tattooing carries a high risk if equipment is shared or ink re-used. Most professional tattoo parlors follow strict guidelines that prevent hepatitis C transmission. Check that the tattooist is well informed and takes blood borne virus transmission seriously by following strict safety regulations.

Is hepatitis C transmitted through the bite of a mosquito or other blood sucking insects or bugs (arthropods)?
No. Hepatitis C virus has not been shown to be transmitted by mosquitoes or other insects (arthropods).

What other information should people with hepatitis C be aware of?
- Hepatitis C is not spread by sneezing, hugging, coughing, food or water, sharing eating utensils or drinking glasses, or casual contact.
- Persons should not be excluded from work, school, play, child-care or other settings on the basis of their hepatitis C status.

Should people living with hepatitis C change their sexual practices?

(a) If they have only one long-term steady sex partner?
No. Hepatitis C is not considered a sexually transmitted infection. If there is blood present during sex there is a risk of transmission and precautions need to be taken such as using condoms.

(b) If they have multiple partners?
Hepatitis C is not considered a sexually transmitted infection. If there is blood present during sex there is a risk of transmission. Condoms should be used at all times to prevent HIV/AIDS and other sexually transmitted infections (STI's).

FAQs about hepatitis C & Pregnancy

Should pregnant women be routinely tested for hepatitis C?
No. Pregnant women have no greater risk of being infected with hepatitis C than non-pregnant women. If pregnant women have risk factors for hepatitis C, then testing is appropriate.

If a pregnant women has hepatitis C what is the chance of the baby getting the virus?
There is about a 5% chance that the baby will get hepatitis C from a mother with hepatitis C. Factors such as viral load will affect transmission rates. There is no evidence to suggest that women with hepatitis C need to have a caesarean delivery. All babies born to hepatitis C positive mothers will have their mother's antibodies for about 18 months. Babies should not be tested, if at all, until after this age because of the likelihood of a false positive result. Due to low transmission rates, some doctors do not recommended that children are routinely tested.

Is there a greater risk of hepatitis C transmission if the mother is co-infected with HIV?
Yes, if the mother is co-infected with HIV, the rate of HCV transmission can be as high as 19%.

Can a woman with hepatitis C breast-feed?
Yes. Hepatitis C is not transmitted through breast milk and there is no evidence that breast-feeding spreads hepatitis C. Transmission can occur in the presence of blood so if the nipples are cracked and bleeding then breast feeding should stop until the nipples have healed.

Should babies born to mothers with hepatitis C be tested for hepatitis C?
The benefits of testing children are disputed amongst medical professionals. Due to low transmission rates, about 5%, from mother to baby, some doctors do not recommended that children are routinely tested. Before making a decision to test a baby or child, get information and advice from at least a couple of reputable sources. Parents shouldn't be pressured into making a decision. Children should not be tested for hepatitis C before 18 months of age because they will have hepatitis C antibodies from the mother.

FAQs about hepatitis C & self management

What can persons living with hepatitis C do to protect their liver?
Follow a healthy lifestyle that includes:

- Reduced alcohol consumption,
- Getting regular health checks,
- Eating nutritious and well balanced meals,
- Taking regular exercise,
- Getting plenty of rest,
- Getting vaccinated against hepatitis A and B and
- Getting informed about and consider HCV treatment.

Should people with hepatitis C be vaccinated against hepatitis B?
People should discuss hepatitis B vaccination with their health care provider. Being infected with hepatitis B and Hepatitis C causes more damage to the liver as it then has to cope with two viruses. Hepatitis B is transmitted through sexual contact and blood to blood contact. Practice safe sex and safe injecting to help protect against hepatitis B, HIV and other infections.

FAQs about hepatitis C treatment

What is combination therapy?
Combination therapy (two drugs in combination) is the standard treatment for hepatitis C. The two drugs used are pegylated interferon and ribavirin.

What is mono therapy?
Mono therapy (one drug) involves the use of pegylated interferon. It is generally only used when a person cannot tolerate the ribavirin that is used in combination therapy.

What are the chances of clearing the virus?
Combination therapy has a success rate (called a "sustained viral response" or SVR) where the virus is successfully cleared for 40% to 80% of people undergoing this treatment. Interferon monotherapy does not have as high a success rate and different studies show ranges from 12% to about 50%.

What influences the chances of clearing the virus?
The success rate of treatment or achieving a sustained viral response (SVR) is influenced by a number of factors such as genotype or strain of the virus, degree of liver damage, age, sex, race etc. Treating doctors will discuss these factors prior to treatment and inform the person what their chances are of clearing the virus.

What is Interferon?
Interferon is a natural substance made by the body to help defend itself against infection. Synthetically made interferon helps to reduce the amount of hepatitis C virus in the body and also helps to reduce progress of disease.

What is Pegylated interferon?
Pegylated interferon has been genetically modified and stays in the body longer than standard interferon.

What is Ribavirin?
Ribavirin helps to slow the rate that the hepatitis C virus replicates.

FAQs about hepatitis C treatment side effects

What are the side effects of interferon therapy?
Some people will experience flu-like symptoms (fever, chills, headache, muscle and joint aches, fast heart rate) early in treatment, but these often lessen with continued treatment. Later side effects may include tiredness, hair loss, low blood count, trouble with thinking, moodiness, and depression. Severe side effects are rare. Although rare, deaths have occurred due to liver

failure or blood infection, mostly in persons with cirrhosis. Interferon dosage must be reduced in up to 40 out of 100 persons because of severity of side effects, and treatment must be stopped in up to 15 out of 100 persons. Pregnant women should not be treated with interferon.

What are the side effects of combination (ribavirin + interferon) treatment?

In addition to the side effects due to interferon described above, ribavirin can cause serious anemia (low red blood cell count) and therefore can be a serious problem for people living with other conditions that cause anemia, such as kidney failure. In these cases, combination therapy should be avoided or attempts should be made to correct the anemia. Anemia caused by ribavirin can be life-threatening for persons with certain types of heart or blood vessel disease.

Ribavirin causes birth defects and pregnancy should be avoided during treatment.

Can anything be done to reduce symptoms or side effects due to antiviral treatment?

There are lots of things that can be done to reduce the impact of side effects. (See fact sheet on “Managing Side Effects” for further information.) It’s best to seek medical support and find what strategies will be best to manage the side effects. Seek out hepatitis C support groups for information and support for dealing with side effects. Some side effects may be reduced by giving interferon at night or lowering the dosage of the drug.

FAQs about hepatitis C genotypes

What does the term genotype mean?

Genotype or strain refers to the genetic make-up of an organism or a virus. There are at least 6 distinct hepatitis C genotypes identified. (See fact sheet on “Genotypes and Treatment” for further information.)

Do I need to know what genotype I have?

If you want to know treatment options and possible outcomes then the answer is "Yes". Knowing the genotype of hepatitis C is helpful in making recommendations and counseling regarding treatment. Patients with genotypes 2 and 3 are almost three times more likely than patients with genotype 1 to respond to therapy. The recommended duration of treatment also depends on the genotype. For people living with genotypes 2 and 3, a 24-week course of combination treatment is usually adequate, whereas for people living with genotype 1, a 48-week course is recommended. For these reasons, testing for genotype is often clinically helpful.

Can persons become infected with different genotypes?
Yes. Prior infection does not protect against re-infection with the same or different genotypes of the virus. (See fact sheet on "Genotypes & Treatment" for further information.)

Informed by:
Centers for Disease Control and Prevention:
http://www.cdc.gov/about/default.htm

The Hepatitis C Trust: http://www.hepCuk