Support Groups and Resources
Joining a support group of people who share common experiences and conditions can help ease the stress of having hepatitis C. Staying educated can provide relief and assurance that you are doing everything possible to treat your condition and feel better. Consider talking to your doctor about resources in your area.

• The American Liver Foundation
  www.liverfoundation.org may also be another starting point to locating resources in your area

• Liver Health Connection
  www.liverhealthconnection.org or 1-800-522-HEPC (4372) has a national HelpLine for questions about liver health
What is Hepatitis C?
The U.S. Preventive Service Task Force recommends screening for hepatitis C infection in persons at high risk for the infection. The Task Force also recommends offering screening for hepatitis C infection for adults aged 18 to 79.

Hepatitis C, or hep C, is an infection of the liver that is caused by the hepatitis C virus (HCV). It can range in severity from a mild illness to a serious lifelong disease. HCV is usually spread when the blood from an infected person enters the body of someone who is not infected.

When the infection goes on for six months or more, it is considered a chronic (long-term) infection. Chronic hepatitis C is one of the most common causes of liver disease in this country. If left untreated it can lead to liver scarring, liver cirrhosis (damage), liver cancer and liver failure.

Symptoms
Most people do not have symptoms when they are infected with HCV. Patients with symptoms may experience:

- Itching
- Fatigue
- Leg swelling
- Loss of appetite
- Abdominal (stomach) discomfort or swelling
- Internal bleeding (esophageal varices)
- Jaundice (yellow skin or whites of the eyes with dark urine)

Prevention
Currently there is not a vaccine to prevent hepatitis C. Hepatitis C can be prevented by avoiding the risk factors.

Risk Factors
People at risk for HCV include those who:

- Have a history of IV drug use
- Received blood, blood products or solid organs from a donor who has hepatitis C
- Have regular contact with blood at work, such as a health care worker
- Had a mother with hepatitis C at birth
- Have been on long-term kidney dialysis
- Have unprotected sexual contact with a person who has hepatitis C
- Received a blood transfusion before July 1992
- Received a tattoo or acupuncture with contaminated instruments (the risk is very low with licensed, commercial tattoo facilities)
- Share personal items such as toothbrushes and razors with someone who has hepatitis C
- Have had a needle stick from a contaminated needle
- Carry the human immunodeficiency virus (HIV)

Diagnosing and Monitoring of Hepatitis C
There are several tests available that can detect and monitor the hepatitis C virus:

- **Antibodies to HCV** are used for HCV diagnosis
- **Hepatitis C RNA level**: Detects the amount of virus in the blood (viral load) and shows how well treatment is working
- **Hepatitis C genotype**: This test determines the family of HCV causing infection and impacts medications used for treatment
- **Albumin**: How well your liver is making protein
- **ALT/AST**: Liver enzyme activity
- **INR**: How well your liver is making blood clotting factors

Living with Hepatitis C
To protect the liver and prevent further damage, people with hepatitis C should:

- **Avoid alcohol**. Even moderate amounts of alcohol can cause more damage to the liver
- **Maintain good nutrition**, exercise and get enough sleep
- **Maintain a healthy weight** as obesity may accelerate liver injury
- **Be vaccinated** against hepatitis A and B to avoid more liver damage
- **Talk with your doctor or pharmacist**. Over-the-counter medications or supplements may cause liver damage.
- **Protect others**. Do not share hygiene items that come in contact with your blood.

Risk Factors, Symptoms and Prevention

**Risk Factors**

**Symptoms**

**Prevention**

Treatment

Treatments for hepatitis C are changing very quickly. Please review your options with your doctor.

- The goal is to cure the HCV infection and limit or prevent complications of HCV.
- The type of hepatitis C and stage of disease determines the treatment to be used and likelihood of response
- The usual treatment period lasts 8 to 12 weeks, but may be as long as 24 weeks in patients with certain health factors
- During treatment, the virus may be undetectable in the blood but may still be present, so relapse after treatment may occur. If the virus is undetectable three months after treatment, relapse is rare. Your doctor will schedule a blood draw for sustained viral response to the medication 12 weeks after completion of therapy (known as SVR-12) to ensure the virus is no longer in your body
- For people with HCV infection who receive a liver transplant, hepatitis C usually returns and requires treatment once again