

ADVERTISEMENT

Hepatitis C Virus Infection



Christopher F. Schultz, MD

Infection with the hepatitis C virus (HCV) is a leading cause of liver disease in the United States. The Centers for Disease Control and Prevention estimate there are more than 2.7 million people in this country infected with HCV and approximately 35,000 new HCV infections occur annually. Chronic or persistent HCV infection develops in 55% to 85% of individuals acutely exposed to HCV. Unfortunately, most persons have no symptoms and the infection can smolder for decades. Among these individuals, 5% to 20% are reported to develop cirrhosis (scarring of the liver) after 20 to 30 years. Chronic HCV infection associated cirrhosis can result in liver cancer, the need for liver transplantation and death from liver disease.

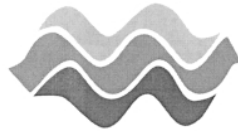
The primary source of HCV transmission is through exposure to HCV-infected blood or blood products. Common modes of exposure include injection drug use, blood or blood component transfusion before 1992, solid organ transplantation from infected donors, occupational exposure to infected blood among health care workers, birth to an infected mother, sex with an infected person, high-risk sexual practices, and

possibly intranasal cocaine use. Since the introduction and routine use of sensitive tests for HCV antibody in 1992, transmission of HCV from blood products and organ transplantation is quite uncommon. If you believe you may have been exposed to HCV, your doctor can order a simple blood test to check for HCV antibodies.

If you are diagnosed with HCV infection, your doctor may refer you to a gastroenterologist or hepatologist (sub-specialists trained to care for HCV-infected patients). Additional laboratory testing is usually required and a liver biopsy may be discussed. Infected individuals are counseled to avoid sharing razors, needles and toothbrushes and to not donate blood, organs, tissues or semen. Because the risk of sexual transmission of HCV between monogamous partners is sufficiently low, many authorities do not advise the use of barrier precautions (i.e., latex condoms) or changes in sexual practices. HCV is not transmitted by hugging or sharing of eating utensils.

Effective treatments for HCV are now available. The goal of therapy is to prevent cirrhosis, the need for liver transplantation and death from liver disease. This is principally achieved by eradication of the HCV infection. Optimal treatment is a self-administered, once weekly injection of peginterferon and twice daily ribavirin pills. Therapy is typically prescribed for 24 or 48 weeks (depending on the type of HCV, called the HCV-genotype).

Next Feature...
Dr. Cattano-IBS



Anne Arundel Gastroenterology Associates, P.A.

410-224-2116

1003645