

# Improving Health Together

Public Health factsheet from the Health Improvement Team

[www.nyypct.nhs.uk/StayingHealthy](http://www.nyypct.nhs.uk/StayingHealthy)

**W**elcome to this edition of Improving Health

Together which focuses on the issue of Hepatitis C, a devious little virus which can lie undetected for years.

**The Hepatitis Strategy for England** aims through the Action Plan to prevent new cases of infection, identify those who are chronically infected and offer specialist advice and treatment.

#### Action 1: Surveillance and research

Improve surveillance and research so that trends in Hepatitis C infection and the effectiveness of prevention measures can be monitored.

#### Action 2: Increasing awareness and reducing undiagnosed infections

An estimated five out of every six people with chronic Hepatitis C are unaware of their infection. This requires action to increase awareness of Hepatitis C amongst health professionals, the public and high-risk groups and the promotion of testing in a range of accessible clinical and community settings.

#### Action 3: High-quality health and social care services

High-quality services for the assessment and treatment of all patients with Hepatitis C need to be co-ordinated and made accessible.

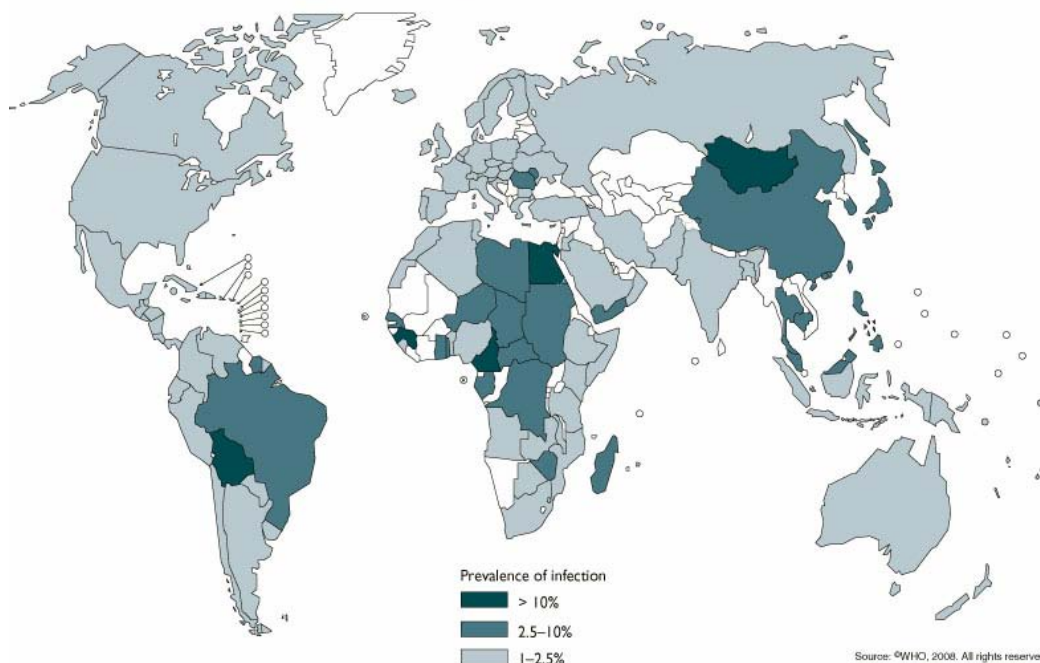
#### Action 4: Prevention

There is evidence of ongoing transmission of Hepatitis C, particularly among injecting drug users. Prevention efforts need to be intensified to reduce the spread in at-risk populations.

# Hepatitis C

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Acknowledgement: WHO [www.who.int/ith/maps/en/](http://www.who.int/ith/maps/en/)

**What is Hepatitis C?** - a blood-borne virus that can cause inflammation and significant liver damage. Discovered in the 1980s, Hepatitis C was known as non-A non-B hepatitis until properly identified in 1989.

Because the virus mutates it is hard for the immune system to locate and destroy. Different genotypes respond differently to treatment. It is possible, although rare, to be infected with more than one genotype at the same time.

Worldwide, an estimated 200 million people are infected with Hepatitis C virus (HCV) but prevalence varies widely. For example in Egypt it is over 10%; in the US it is believed to be nearly 2% and in northern Europe around 1%.

The UK has a relatively low prevalence, but in high risk populations prevalence is higher – around 30% intravenous drug users (IVDU) were found to test positive in a UK study in 2002, and incidence is higher in the prison population.

**Early treatment improves outcome - it is important to be aware of who is at risk and offer testing.**

- ◆ Approximately 200,000 people in England have chronic Hepatitis C infection.
- ◆ Over time this can lead to cirrhosis and primary liver cancer.
- ◆ The majority of those infected are probably unaware – for every known case there may be four undiagnosed cases.
- ◆ Over 90% of those infected are intravenous drug users (*HPA annual report 2007*).
- ◆ In North Yorkshire the number of cases has increased year on year from 59 cases in 2003 to 141 in 2007.

## Who is at risk?

Hepatitis C testing should be offered to anyone who:

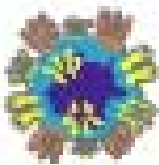
- ◆ has unexplained abnormal liver function tests
- ◆ is currently injecting drugs
- ◆ has ever injected drugs, however long ago, even if only once or twice
- ◆ has shared snorting equipment, e.g. bank notes for taking cocaine
- ◆ received transfused blood before September 1991 or blood products before 1986
- ◆ has been accidentally exposed to blood where there is a risk of transmission of HCV
- ◆ babies born to mothers known to be infected with HCV
- ◆ is the child of a mother with HCV
- ◆ is a regular sexual partner of someone with HCV
- ◆ has received medical or dental treatment in countries where infection control may be poor
- ◆ has had tattoos, piercings, acupuncture or electrolysis where infection control procedures are poor.

## Treatment

There is good evidence of benefit from treating in the early stages of the disease—emphasising the need for early detection. The National Institute for Health and Clinical Excellence (NICE) recommends treatment of chronic Hepatitis C with combined pegylated interferon and ribavirin, which can successfully clear the virus in up to 55% of patients overall. This combination of drugs has achieved considerable success, but there are some unpleasant side effects and individuals need support.

Current injecting drug users and people who drink excess alcohol are **not** precluded from treatment. Since the recent NICE recommendations, liver biopsy need no longer be routine in assessing patients for treatment, though it may be advised for some patients.

Treatment may have side effects but these can be satisfactorily managed in most cases. Treatment may be contraindicated for some medical and psychiatric conditions.



## Living with Hepatitis C

Hepatitis C infection can be acute (following initial infection) or chronic. The acute stage refers to the first 6 months of infection and may be symptomless. About 20% of those infected will clear the virus from their body and experience no long-term effects; the remaining 80% will develop chronic infection.

**Those diagnosed with Hepatitis C** can minimise the impact of the disease on their life.

- ◆ **Protect the liver** - stop drinking altogether or limit alcohol
- ◆ **Maintain a healthy weight** – helps the body to respond to treatment. Being overweight may increase the likelihood of fatty deposits in the liver which could worsen the condition.
- ◆ **Practise safer sex** – though sexual transmission is uncommon using a condom will eliminate the risk. Sexual partners should be aware of infection, and long-term partners of people with Hepatitis C should consider getting tested.
- ◆ **Use contraception** while undergoing treatment and for six months after - the drugs used can cause severe birth defects or induce foetal loss.
- ◆ **Emotional support** helps those diagnosed with Hepatitis C come to terms with the illness and implications. Local support groups run drop-in sessions or can arrange contact with other people who have Hepatitis C. If suffering depression, they should contact their GP.
- ◆ **Travel abroad** – advice about travel vaccine should be sought. Copies of recent blood tests or medical records are useful if any medical procedures are needed while away.

## Hepatitis C in pregnancy

Although pregnant women are not routinely offered testing for Hepatitis C, it is important to do so if they are in one of the 'at risk' groups (see above). Treatment cannot be given during pregnancy, but can start after delivery.

## Hepatitis C – the patient's perspective

*"Combination therapy is demanding and prolonged; it's worth doing, but it's difficult. In 6 months' treatment I suffered loss of self-esteem, energy, focus and mood swings that landed me in difficult situations - and I felt the lack of emotional support. Other patients, as I did, experience highs and lows, but more lows than enough.*

*The patient /professional barrier is very real - I am not devaluing the doctor's job, but when we walk out that door we are alone - who can call a doctor at 1am for a chat? Not everyone has a personal support network, many people go through this without internet, friends or family. Preconceived ideas, misinformation and ignorance of Hep C is to say the least sad. I have felt the brunt of ignorance and it can be damaging. I know of families turning their back on the situation, friends pigeonholing the illness and condemning behaviour of those infected.*

*Everyone experiences symptoms differently but having someone who can relate to the condition would be so helpful. Volunteering is not everyone's cup of tea - some will want to put it all behind them but more people are entering the professional side after personal experience. Ex drug users, alcoholics, even ex cons, may be our greatest resource - you cannot pull the wool over someone's eyes when they have been through it themselves."*

Anon

## Testing for HCV?

### How do I test for HCV?

The primary screening test is a blood test for antibodies to the virus, which indicates if a person has ever been infected. A positive test should be confirmed with a second sample. As 20–40% of people will clear the virus naturally a second test is required to establish if the patient is still infected.

It can take three months for antibodies to become detectable, so negative tests should be repeated if exposure was within three months of the test.

### Pre-test discussion

Pre-test discussion should include:

- ◆ Hepatitis C, its natural history and the benefits offered by treatment
- ◆ what the test involves, testing timescale and confidentiality of results
- ◆ assessment of exposure risks and establishing when the last risk activity took place
- ◆ implications of a positive result for the individual and his/her family or close contacts
- ◆ what personal support network the individual may have; information about national/local organisations that provide support.

It may also offer the opportunity to advise injecting drug users about harm minimisation and to offer them the hepatitis A and hepatitis B vaccine.

### Post-test discussion

Post-test discussion depends on the result.

#### **Negative antibody result**

- ◆ Further testing will be required if the last exposure risk occurred in the preceding 3 month 'window period'.
- ◆ Ways of avoiding infection in the future.

#### **Positive antibody result**

- ◆ Positive antibody results should be confirmed on a second blood sample, when tests for HCV RNA can also be performed if the positive antibody results are confirmed.
- ◆ Advise not to donate blood or carry an organ donor card.

#### **Positive Hep C PCR result**

- ◆ Patients should be referred to a specialist for further assessment.
- ◆ Stop or reduce alcohol consumption (associated with more rapid progression of liver disease).
- ◆ Ways of avoiding infecting others.
- ◆ Consider the need to test other family members or close contacts.

#### **Negative Hep C PCR result**

- ◆ A positive antibody and negative Hep C PCR result indicates a previously resolved infection, but not immunity to further infection.
- ◆ Patients who are antibody positive but Hep C PCR negative should have a second Hep C PCR test after 4–6 weeks to confirm their negative status.

## Practical tips for health promotion

### Avoiding Hepatitis C

There's no vaccine to protect against Hepatitis C, but the risk of transmitting infection or becoming infected can be minimised by avoiding contact with the blood or blood products:

- ◆ **never share injecting or other drug equipment** that might have been in contact with blood
- ◆ **use a condom** if unsure of partner's sexual history - condoms provide all-in-one protection against pregnancy and sexually transmitted infection
- ◆ **ensure the equipment used is sterile** if considering ear or body piercing, tattoo or semi-permanent makeup, or acupuncture, in this country or abroad
- ◆ **don't share razors, toothbrushes or tweezers** - these may have been in contact with blood
- ◆ **cover all cuts and grazes** with waterproof plasters, especially on your hands.

## World Hepatitis C Day

World Hepatitis C Day is held annually on 19 May. Every year local substance misuse services organise a range of activities to mark the day and raise awareness. This year services organised showings of the film 'Louie, Me and Hep C' to service users and the public alongside market stalls in Harrogate, Selby and York promoting awareness of the virus.



Photograph: Staff from Compass Selby

## The hospital inpatient

At York District Hospital, the Substance Misuse Liaison Service is an example of the support available. The team is able to provide training and education to all hospital staff about substance misuse issues including Hepatitis C. This service also provides support to drug and alcohol using patients with complex needs. Too many patients with Hepatitis C are admitted with deteriorating liver function, accelerated by alcohol consumption. The key message that alcohol should be avoided or limited if a patient has Hepatitis C must be emphasised.

For further information or any comments about the service please contact Karen Williams on 01904 726559.

## Local contacts

There are no specialist services in North Yorkshire and York for Hepatitis C; but the following are available.

**Confidential testing** is available at the GUM clinics

York and Selby	01904 725417/2
Scarborough	01723 342785
Harrogate	01423 553428
Northallerton	01609 764209
Skipton	01756 795757

**Substance Misuse Services** provide confidential advice and information about Hepatitis C. Some also provide testing for Hepatitis C. Apart from York PMS, all provide confidential, free needle exchange services for drug users.

York	Compass One PMS (for homeless people)	01904 670046 01904 725406
Selby	Compass Selby	01757 290939
Scarborough	The Cambridge Centre	01723 367475
Harrogate	HADA	01423 525999
Northallerton	HARCAS	01609 780486
Skipton	CODA	01756 794362

## National contacts

The Hepatitis C Information Line is available for anyone with concerns about Hepatitis C, or who would like more information. Telephone 0800 451 451 - lines are open 10am to 10pm, 7 days a week.

An e-mail can be sent from the following link:  
[www.nhs.uk/Livewell/hepatitisc/Pages/Emailpage.aspx](http://www.nhs.uk/Livewell/hepatitisc/Pages/Emailpage.aspx).

## Key documents

Department of Health Hepatitis C, July 2004 *Action Plan for England*  
[www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4084521](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4084521)

Department of Health Hepatitis C, August 2002 *Strategy for England*  
[www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/Browsable/DH\\_4103274](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/Browsable/DH_4103274)

The Health Protection Agency Annual Report 2007 *Hepatitis C in England*  
[www.hpa.org.uk/web/HPAwebFile/HPAweb\\_C/1204100441645](http://www.hpa.org.uk/web/HPAwebFile/HPAweb_C/1204100441645)

### Production Team:

Kate Lloyd, Senior Public Health Nurse	01845 573843
Dr Louise Coole, Consultant in Communicable Disease	01904 567675
Cathie Gillies, North Yorkshire and City of York DAATs	01347 825100
Philippa Press, Health Improvement Manager	01904 724118
Anna Padget, IPC Education Resource Specialist	01845 573848
Jacqui Fox, Public Health Information Specialist	01756 701765

## Websites

**NHS Choices**   
[www.nhs.uk/Livewell/hepatitisc](http://www.nhs.uk/Livewell/hepatitisc)

Hepatitis C Resource Centre - information on all aspects of Hepatitis C, including the FACE IT Hepatitis C Awareness website.

**Department of Health**  
[www.dh.gov.uk/en/PublicHealth/Communicablediseases/HepatitisC/index.htm](http://www.dh.gov.uk/en/PublicHealth/Communicablediseases/HepatitisC/index.htm)



Access to key documents.

**NHS Direct**  
[www.nhsdirect.nhs.uk/articles/article.aspx?ArticleId=670](http://www.nhsdirect.nhs.uk/articles/article.aspx?ArticleId=670)



Patient information.

**The Hepatitis C Trust**  
[www.hepctrust.org.uk/](http://www.hepctrust.org.uk/)



Support, information and advice.

**Health Protection Agency**  
[www.hpa.org.uk/infections/topics\\_az/hepatitis\\_c](http://www.hpa.org.uk/infections/topics_az/hepatitis_c)



Information and advice, detailed guidance and Epidemiological Data.

**Hep C Centre**  
[hepccentre.org.uk/](http://hepccentre.org.uk/)



Provides information, support, advice and resources.

**Clinical Knowledge Summaries**  
[www.cks.library.nhs.uk/patient\\_information/leaflet/hepatitis\\_c](http://www.cks.library.nhs.uk/patient_information/leaflet/hepatitis_c)



Practical & reliable information about common conditions which helps healthcare professionals make evidence-based decisions about the healthcare of their patients.

## Order your free resources

These are the resources recommended by your Public Health team for use with this Hepatitis C campaign.



### Department of Health

Publications Orderline 0300 123 1002  
Hepatitis C Your Questions Answered Leaflet (286774)  
Hepatitis C poster (40220)



### Hepatitis C Resource Centre

Telephone: 0870 242 2467  
A range of leaflets and posters available.  
[hepccentre.org.uk/materials.htm](http://hepccentre.org.uk/materials.htm)

North Yorkshire and York PCT  
Station Road Business Park, Station Road  
Thirsk, N Yorkshire, YO7 1PZ  
Tel: 01845 573800 Fax: 01845 573805

[www.nyypct.nhs.uk/StayingHealthy](http://www.nyypct.nhs.uk/StayingHealthy)