

So you have hepatitis C, what's next?

Your doctor will usually send you for a liver scan (also known as a Fibroscan™) which provides information about the health of your liver. This fifteen minute procedure sends a painless pulse through your liver and records how stiff or damaged your liver is. There are no side effects or complications, and your liver nurse can discuss the results with you.

As an alternative to Fibrosocan™ your doctor may do a screening blood test (called APRI) which may tell you whether or not you have cirrhosis.

What do the results mean?

You will be provided with one of the following results:

- **Minimal or Mild fibrosis:** You have a healthy liver with no or small amount of scarring on the liver. This will disappear when the HCV is cured.
- **Moderate or severe fibrosis:** You have a fair amount of scarring on the liver.
- **Cirrhosis:** Your liver is very scarred, which may cause your overall health to deteriorate.

If you do not have cirrhosis then your liver fibrosis will slowly disappear after your HCV has been cured. If you have cirrhosis you will be referred to your specialist service for treatment of hepatitis C, and for monitoring for long term complications of severe liver damage. In all other cases your GP can manage and treat your hepatitis C.

Treatment

Combination direct acting-antivirals (DAAs) are now funded in New Zealand to treat all patients infected with hepatitis C. Treatment consists of 8 - 12 weeks of tablets with a cure rate of almost 100 percent, with fewer side effects compared to previous treatments.

There are two DAA medications available:

1. **MAVIRET** (glecaprevir and pibrentasvir) for everyone with compensated hep C.
 - **8 weeks if you do not have cirrhosis**
 - 12 weeks if you have cirrhosis

Treatment is 3 tablets taken daily with food which can be prescribed by your GP or specialist.

2. **HARVONI** (Ledipasvir and Sofosbuvir) for everyone with decompensated hep C.

This is only available through your hospital specialist and is prescribed with Ribavirin for 12 weeks.

Why is the liver important?

The liver is the largest organ inside the body. It is located behind the ribs, in the upper right-hand part of the abdomen.

The liver performs over 500 functions, including:

- Processing food products into sugar, fat and protein.
- Storing vitamins, sugar and iron.
- Controlling the production and removal of cholesterol.
- Clearing the body of waste products, toxins and some bacteria.
- Producing clotting factors to stop excess bleeding.

For further information:

www.healthnavigator.org.nz
or phone **0800 33 20 10**



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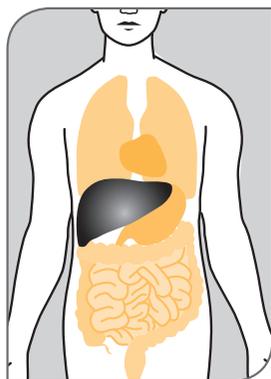
Understanding and getting Cured from Hepatitis C



**Know it.
Test it.
Treat it.**

Hepatitis C causes inflammation of the liver. The virus is spread through blood-to-blood contact.

No vaccination is currently available but, in many cases, hepatitis C can now be cured.



What is hepatitis C?

Hepatitis C is a blood-borne virus that can damage the liver. The virus causes inflammation of the liver, which can affect the way the liver functions. Currently, there is no vaccine to prevent hepatitis C infection. However, in many cases, it can be cured.

How common is chronic hepatitis C?

An estimated 50,000 people have chronic hepatitis C in New Zealand. However, only 50 - 60 percent are aware they have the virus.

Who is at risk of hepatitis C?

Hepatitis C is spread through blood-to-blood contact. Therefore you could be at risk if you answer "yes" to any of the following...

- Have you ever injected drugs?
- Have you ever been in prison?
- Have you ever had a tattoo or piercing?
- Did you ever receive a blood transfusion before 1992?

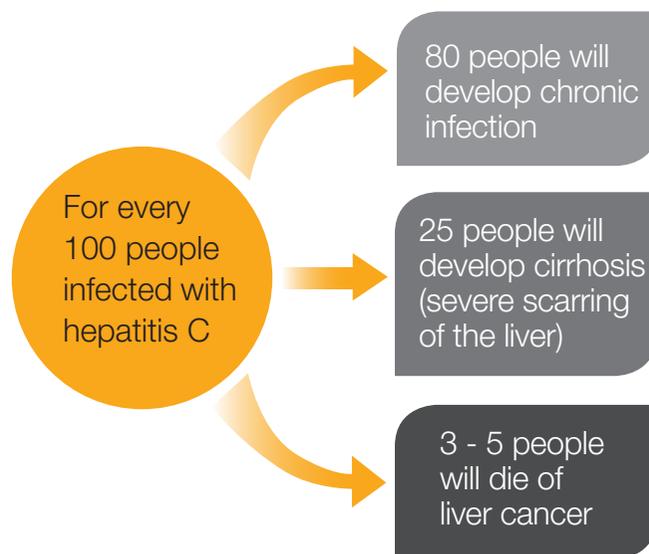
- Have you ever had jaundice, hepatitis, abnormal liver tests?
- Have you ever lived in or had medical treatment in Eastern Europe, S.E. Asia, the Middle East, or Indian Subcontinent?
- Did your mother or a household member have hepatitis C?

What are the symptoms?

Most people infected with hepatitis C will have symptoms of tiredness (fatigue), joint pains, loss of appetite, nausea or mood changes which might have been attributed to other causes. However, these symptoms rapidly disappear after successful treatment.

If left untreated, people with cirrhosis may eventually develop symptoms and signs of liver failure (jaundice, swollen abdomen and feet, confusion, bleeding from gullet).

What can happen to people with chronic hepatitis C without treatment?



How to avoid infecting others?

Many things can be done to avoid infecting others:

- Cover any sores or cuts.
- Do not share razors or toothbrushes.
- Avoid sexual practices that might risk blood contact.
- Do not share piercing, tattooing or drug injecting equipment.
- Clean up spilt blood with household bleach (one part bleach to nine parts water). Do not put bleach on skin.
- Do not donate blood.

Hepatitis C cannot be spread through social contact i.e. touching, kissing, sneezing, coughing or sharing cutlery.

Hepatitis C is **not** a sexually transmitted disease and condoms are not needed unless there is risk of blood-to-blood contact.

What do the blood tests mean?

Two blood tests are required to diagnose chronic hepatitis C.

- **Antibody test (anti-HCV):** The first blood test looks for antibodies and confirms whether you have ever been in contact with the hepatitis C virus. If this test is positive, it doesn't necessarily mean you are currently infected with hepatitis C, but it does mean you have been exposed to the virus at some point.
- **PCR test:** The second blood test - the polymerase chain reaction (PCR) test - confirms if the virus is currently present, and whether you have hepatitis C.

*Your GP can refer you for these blood tests which in most cases will require a single blood sample to test for both antibodies and active virus.