HEPATITIS FACT SHEET

National Overview

- Hepatitis C virus (HCV) is the most common chronic blood-borne viral infection in the United States, according to the Centers for Disease Control (CDC).
- HCV, formerly known as non-A non-B hepatitis, was first identified in 1988. It was estimated to have infected as many as 242,000 Americans per year during the 1980s.
- According to the CDC and HIV and Hepatitis organizations, an estimated 4.1 million Americans (1.6%) are infected with HCV.[i]
- Of the Americans infected with HCV, 3.2 million (78%) have chronic hepatitis C. These numbers are likely to be underestimated, because certain populations at high risk for HCV, such as incarcerated persons, are not included in the statistical information.
- Hepatitis C is responsible for an estimated 8,000-10,000 deaths in the United States every year. That number is likely to triple within the next 10-20 years, unless effective interventions are developed.[ii]

California Overview

- Currently, Hepatitis C affects an estimated 638,500 people in the State of California. This has increased from 598,000 in 1997. Of the people currently infected, an estimated 447,000 have chronic Hepatitis C.
- Five thousand Californians are newly infected each year.

Los Angeles County Overview

- In Los Angeles County, an estimated 180,000 persons are infected with HCV, and rates of HCV infection in the general population are estimated at 1.8%.
- Rates of infection among some high-risk populations, such as injecting drug users, are much higher. For example, results from a CDC demonstration project in Los Angeles County show rates as high as 67.8% among injecting drug users.[iii]
- Between 1997-2003, Los Angeles County Department of Health Services (DHS) has received 70 reports of acute Hepatitis C and 56,298 reports of chronic Hepatitis C. Cases of chronic hepatitis are not confirmed because DHS, like most health departments around the country, does not have the resources to investigate these reports.
- Underreporting of HCV cases is an issue for many reasons: persons may be unaware that they are infected, Hepatitis C tests are expensive and hard to access, the definition of acute and chronic cases of HCV has changed and may be confusing to some health care providers and not all health care providers are aware that chronic HCV is reportable.

Health Impacts

- HCV is transmitted by exposure to infected blood products. It is most common among people who have injected drugs at some point during their lives. People who have received blood transfusions prior to July 1992 are also at risk. Others at risk include children born to HCV-positive women, sexual partners of persons with HCV and health care or emergency workers.
- Many persons who have HCV are not aware they are infected. Most persons with acute infection (60%-70%) show no symptoms. Of those who do show symptoms, many show nonspecific symptoms such as abdominal pain. Only 20% to 30% of those who show symptoms have jaundice.

HEPATITIS C FACT SHEET – cont.

Health Impacts (cont.)

- After acute infection, most persons (75%-85%) develop chronic HCV infection. Active liver infection develops in 60-70% of chronically infected persons. Chronic liver disease usually progresses at a slow rate without symptoms or signs in the majority of patients for 20 or more years after infection.
- Persons who do not know they have acute or chronic HCV infection may unknowingly transmit the disease to others. Also, they may unknowingly engage in behaviors that could further damage their liver, such as drinking alcohol.
- HCV is the leading cause of chronic liver disease in the United States. Persons chronically infected with Hepatitis C are at risk for developing cirrhosis and liver cancer.
- Hepatitis C is now the leading cause of liver transplants in the United States.[ii]
- Hepatitis C virus can be "cleared" from the body. Some infected people may clear the virus without treatment after acute infection (approximately 15 – 20% of mono-infected people). Acute infection refers to the first six months of infection, when the body develops antibodies to the new viral infection. HIV/HCV+ people have a lesser chance of viral clearance on their own during acute infection (7 – 10% success rate). For those who do not clear the virus on their own, treatment is recommended during acute infection, because the chances are much better in this early phase of infection that the virus will respond to treatment and be cleared. During chronic infection (after six months and before one might progress over time to advanced liver disease, fibrosis or cirrhosis), if the virus is treated successfully, where there is a sustained virologic response (SVR), meaning the Hepatitis C viral load is undetectable six to 12 months post treatment, then the virus is considered "cleared" from the body.

HIV and Hepatitis C Co-infection

- Studies show that co-infection rates with Hepatitis C can be as high as 40%. An estimated 60-90% of people who contracted HIV from injection drug use also are infected with Hepatitis C.
- The progression of Hepatitis C appears to occur 2-5 times faster in HIV infected individuals than in people with Hepatitis C mono infection.
- Once Hepatitis C damages the liver, the liver has a harder time absorbing HIV medications. HIV and Hepatitis C medications can also have negative interactions and can cause extreme side effects.
- The presence of Hepatitis C may slow immune system recovery after HIV treatment is started. People on HIV protease inhibitors can also experience body changes, which result in higher fat in the liver.

Economic Impact

- The costs of acute and chronic Hepatitis C are high. It is estimated that over $600 million are spent each year in the United States on HCV-related medical care and lost wages. In California, costs are estimated at over $50 million per year.[ii] Costs are expected to continue to grow in the future, as people infected 10-30 years ago begin to experience problems related to chronic liver disease.
- There is no cure for HCV, and treatments for those infected with HCV are very expensive and not very effective. There is currently no vaccine to prevent HCV.

i Source: National Health and Nutrition Examination Survey (NHANES III)
ii California Hepatitis C Strategic Plan
iii Department of Health Services Office of AIDS Programs and Policy unpublished data, 2003.