



Few Children With Hepatitis C Receive Treatment

Nationwide study found just 1 in 3 kids with HCV were linked to care, and only 1 in 10 started antiviral treatment.

August 18, 2025 By [Sukanya Charuchandra](#)

Only about a third of children with [hepatitis C](#) were linked to care and only 12% received antiviral treatment, according to study findings published in [Pediatrics](#). Black children were significantly less likely than their white or Latino peers to receive care, revealing stark disparities in the pediatric hepatitis C treatment cascade.

“We have treatments for hepatitis C where it’s just two or three months of pills and then over 95% of people are cured,” lead author Megan Rose Curtis, MD, of the Washington University in St. Louis School of Medicine, said in a [news release](#). “But we are still having difficulties in getting the treatments to the populations that need them the most.”

Hepatitis C virus (HCV) can be transmitted from mother to infant during pregnancy or delivery. With cases of pediatric hepatitis C rising, [guidelines from the American Association for the Study of Liver Diseases](#) recommend [direct-acting antiviral therapy](#) for all adolescents and children ages three years and older, regardless of severity. Curtis noted that clinicians may delay treatment because some children with HCV will spontaneously clear the virus, but this isn’t always the case.

Curtis and colleagues conducted a retrospective cohort study using data from the TriNetX Research Network, a nationwide electronics health records database. The study population included 928 children born between 2000 and 2018 who were diagnosed with HCV before reaching adulthood at age 18.

Among this population, 32% were linked to hepatitis care and 12% were prescribed antiviral therapy. After adjusting for sex, region and birth year, Latino children were twice as likely, and white children were three times more likely, to be referred to care compared with Black children. Children living in the South were least likely to receive care compared with those living elsewhere in the country.

Possibly due to differences in medication availability and insurance coverage, children born between 2014 and 2018 were more likely to be treated than children born earlier. The first direct-acting antivirals were approved in late 2013. Before that, treatment involved interferon-based

therapy, which is often poorly tolerated. More research on direct-acting antivirals for children and updated pediatric guidelines may have led to a higher share of children receiving treatment after the study period.

“Targeting interventions toward increasing linkage to care could represent an opportunity to advance HCV elimination goals and reduce disparities,” the researchers wrote.

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