Hep C 101

June 5, 2013 By Benjamin Ryan

Hepatitis C is a virus that can result in serious liver damage, including cirrhosis (scarring of the liver), liver cancer and possibly death. The disease is the main cause of both liver cancer and liver transplants in the United States. There is no vaccine for the hep C virus (HCV), but there are treatments that can cure the virus in some people.

How prevalent is hep C?
According to the Centers for Disease Control and Prevention (CDC), an estimated 3.2 million Americans are living with hep C. Most don't know they have it.

How is it transmitted?
Hep C is primarily transmitted when one person's infected blood enters the bloodstream of another. Routes of transmission include:

- Sharing needles for injection drug use.
- Blood transfusions and organ transplants before 1992.
- Tattoos or piercings from unsterilized instruments.
- Rarely, through outbreaks resulting from poor infection control in health care facilities.

Is it transmitted sexually?
Rarely. There is ongoing evidence, however, that men who have sex with men (MSM), especially those who are HIV positive and those who engage in unprotected sex with multiple partners, are at risk for sexual transmission of the virus.

How do you know if you are infected?
The only way to know for certain if you have hepatitis C is through blood tests.

Who should get tested?

- Baby boomers, born between 1945 and 1965 (this group has by far the largest prevalence of the virus).
- Those who received an organ transplant or blood transfusion before 1992.

- Anyone who has ever injected drugs, even once.
- People who are HIV positive or have had abnormal tests or liver disease.

What happens after hep C infection?
About 15–25 percent of people will clear the virus on their own. The remaining 75–85 percent will develop what is known as chronic, or long-term, hep C infection. The virus has a very long incubation period, so people may live decades with no symptoms while the virus progressively damages the liver.

What are the symptoms?
Once hep C has more seriously damaged the liver, symptoms may include fever, fatigue, loss of appetite, nausea, vomiting, abdominal pain, dark urine, grey-colored stools, joint pain and jaundice (the skin and whites of the eyes turn a yellow or pumpkin color).

How is hep C treated?
Hep C is treated with direct-acting antivirals (DAAs). The current standard of therapy is a combination of pegylated interferon and ribavirin with one of two currently available protease inhibitors: Incivek (telaprevir) or Victrelis (boceprevir).

Treatment lasts between 24 and 48 weeks. About 50 to 75 percent of people will achieve a cure, also known as a sustained virologic response (SVR).

Are newer, improved drugs in the works?
Numerous hepatits C drugs are currently in the pharmaceutical pipeline. Research has shown that these therapies may promise shorter treatment durations, fewer side effects, higher cure rates and simplified, interferon-free drug regimens. Interferon can cause difficult, flu-like side effects.

While there is never a guarantee that the U.S. Food and Drug Administration will approve any new drug, the outlook is promising that revolutionary new therapies may hit the market in the next year or two.

Source: CDC

© 2026 Smart + Strong All Rights Reserved.
http://beta.docker.hepmag.com/article/hep-c-101-24014-1057144527