Hepatitis C May Hasten Menopause, Lower Fertility

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Hepatitis C virus (HCV) may compromise women's reproductive capacity. Earlier treatment of the virus may help mitigate such related risks.

Between 2011 and 2015, Italian researchers studied a group of 100 women with hep C and chronic liver disease, 50 women with hepatitis B virus (HBV) and chronic liver disease who were matched with the HCV-positive women according to age, and 100 HBV/HCV-negative age-matched control women without liver disease. They also analyzed data on 6,085 HCV-positive, 305 HCV/HIV-positive and 20,415 HCV/HIV-negative women from a U.S. database.

Compared with those with HBV and the members of the control group, those with HCV were a respective 11.6 and 5.3 times more likely to have a menopausal level (below 0.16 nanograms per milliliter) of the anti-Mullerian hormone (AMH).

Lower AMH levels were associated with worse liver disease among the women with hep C. Additionally, HCV infection was linked to a nearly 10-fold increased likelihood of a miscarriage compared with being HCV negative.

Post–hep C treatment, those who were not cured saw their AMH level drop while those who were cured maintained a stable AMH level. The miscarriage rate was 32 percent for those cured compared with 64 percent for those whose treatment failed, indicating that a cure was associated with a 74 percent lower risk of a miscarriage.

Among the women in the U.S. cohort who had experienced pregnancy, those with hep C were 34 percent more likely to have had a premature birth, 24 percent more likely to have had gestational diabetes and 24 percent less likely to have had a live birth compared with HCV-negative women.