Treating Hep C

Hep C medications can now cure most people with the virus

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The past decade has seen the advent of effective new oral hep C medications known as direct-acting antivirals (DAAs). These new drugs can now cure most people with the virus, with success rates approaching 100%. The days of injected interferon therapy—which often lasted a year or more, caused difficult side effects and cured only about half of treated people—are over!

If you test positive for hep C antibodies, you should receive a follow-up PCR viral load test. This test measures viral genetic material, known as HCV RNA, and will show whether you have a current active infection. Antibodies remain in the blood forever, and you will continue to test positive even if your HCV viral load becomes undetectable with treatment.

Guidelines now say almost everyone with chronic hep C is eligible for treatment, regardless of how advanced their liver disease is or whether they continue to use drugs or alcohol. This includes people with acute HCV—experts no longer recommend waiting to see whether the immune system will clear the virus naturally.

The newest DAAs work against all variants of HCV, known as genotypes. Some of the older DAAs work only against specific viral genotypes. The most effective treatment regimens combine medications that target at least two steps of the HCV lifecycle, which helps prevent the development of drug resistance. See [Guide to Hepatitis C Treatment] for more details.

Treatment usually involves pills taken once daily. DAAs usually cure the virus in eight or 12 weeks. They are well tolerated with few side effects. Even people with very advanced liver disease, liver cancer, other serious health problems or a liver transplant can be successfully treated with the new meds. These medications are expensive, but help is available from pharmaceutical companies and other sources.
