



Curing Hepatitis C Coinfection Among People Living with HIV

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To put a spotlight on the impact of hepatitis C (HCV) coinfection among people living with HIV and opportunities now available to treat and eliminate this common coinfection, on May 17, 2018, the Health Resources and Services Administration (HRSA)-funded AETC National Coordinating Center will be observing the first-ever HIV/HCV Coinfection Awareness Day. As we prepare for this new observance during Hepatitis Awareness Month, we're faced with both challenges and opportunities. Sharing personal stories of successful HCV treatment among people living with HIV/HCV coinfection can be a powerful tool to help people understand the importance of diagnosis and treatment, how treatments have changed, and encourage them to seek out new and effective treatments and be cured.

HCV Coinfection Common among People Living with HIV, Now Curable

People with HIV infection are disproportionately affected by hepatitis C. One in four people with HIV are coinfecting with HCV in the United States. Approximately 80% of people with HIV who inject drugs also have HCV since injection drug use is an efficient way to transmit both of these bloodborne infections. The National Viral Hepatitis Action Plan designated people with HIV-HCV coinfection as one of its [priority populations - PDF](#) for HCV prevention, diagnosis, and cure because of this high prevalence and because hepatitis C progresses faster and causes more liver-related health problems among people with HIV than among those who do not have HIV. As a result, in comparison with HCV-monoinfected patients, persons coinfecting with HIV have higher liver-related mortality as well as overall mortality.

But the new direct-acting antivirals that cure hepatitis C provide an opportunity to eliminate this common coinfection and its deadly consequences for people living with HIV/HCV coinfection. Everyone who has HIV should be screened for HCV. A blood test can detect HCV before symptoms even appear. If the test result is positive for chronic HCV infection, new FDA-approved treatments cure most people with [HCV](#) with an all-oral, once-daily medication that requires treatment for only

12-24 weeks and has minimal side effects. These treatments are significant improvements over previously available HCV treatments that were effective in fewer people with HIV/HCV coinfection, had more side effects, and required up to a year to complete. The new direct-acting antivirals are much more effective in this group of patients and generally safer and better tolerated.

Stories of HCV Coinfection and Cure among People Living with HIV

Lillian was diagnosed with HIV in 1989 and HCV in 2006. In the video below, she describes how her HCV diagnosis was very difficult for her to accept. She describes how she had to work with her healthcare provider to adjust her medication regimens when her liver enzymes and T-cell counts were affected by the HIV and HCV medications. Lillian was learning about HCV treatment alternatives and considering whether to try them. (Note: Video posted in 2012, before the availability of the newest treatments that do not require interferon injections.)

Knowing both your [HIV and HCV status is important](#) because HIV affects your whole immune system, including your body's ability to fight off HCV. Some HIV treatments can affect or damage your liver, and some HCV treatments can interact with HIV medications, so it's important for healthcare providers and patients to work together to determine the best treatment plan for their coinfection.

In the video below, Peter McLloyd of Chicago's Ruth M. Rothstein CORE Center shares his story of living with HIV/HCV coinfection and his ultimately successful attempts to cure his HCV infection. Peter was diagnosed with HIV in 1997 and learned his HCV status a few years later. He describes some of the older HCV medications he tried which had severe side effects that greatly decreased his quality of life and were ultimately not successful in curing his HCV. A few years later, Peter was introduced to the new direct-acting antivirals as a new treatment option. Although he eventually needed two rounds of treatment before he was cured of his HCV infection, Peter talks about the minimal side effects of these newer drugs, and noted that he was able to work every day during treatment. Throughout treatment, he could feel his energy increasing every day.

Lillian and Peter's stories illustrate the importance and opportunity of successful treatment of HCV for people living with HIV. For more information or to learn how you can participate in HIV/HCV Coinfection Awareness Day on May 17, please visit the [AETC Coordinating Resource Center's website](#).

@AETCNCRC has designated May 17 as #HIVHCVcoinfection Awareness Day! Join us in honoring this day among people living with #hepC and #HIV: <https://go.usa.gov/xQUV5>

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