



Drowning in Hepatitis C Stigma

November 27, 2017 By [Lucinda K. Porter RN](#)

Imagine that you do something that you really love, and hepatitis C combined with someone's ignorance, causes it to be taken away from you. Dida Kutz was a dedicated volunteer diver at the Monterey Aquarium. For two consecutive years, she was named volunteer diver of the year. The following year she was dismissed. During a dive physical exam, a doctor declared that although Dida's hepatitis C was cured, she "might relapse and infect like 20 people." Dida's attempts to override his decision have fallen on deaf ears. You can read her [story here](#).

Dida hasn't stopped fighting to improve hepatitis C awareness in the diving community. She contacted me recently regarding an article in the Fall 2017 issue of [Alert Diver](#). (Click on the Digital Edition link in the right column and go to page 54). Dida asked me to write a letter to the magazine, which I did. I am asking others to contact them too (www.alertdiver.com/?a=contact).

Here is the letter I wrote to AlertDiver...

Dear Editor,

Your philosophy states, "Alert Diver is a forum for ideas and information relative to dive safety, information and practice." However, the article, "Diving and Hepatitis C" by Jim Chimiak, MD (Fall 2017) does not conform to your philosophy. While I appreciate Dr. Chimiak's intention to educate, I am uncomfortable with some of the information.

The article states that HCV is "very contagious." This isn't true. HCV may be transmitted when infected blood comes into contact with noninfected blood. While it is true that only a microscopic amount of blood is required for transmission, generally, the contact has to be direct. Yes, it is possible for saliva to be tinged with blood, but HCV does not survive the gastric system. For that microscopic amount to infect, the blood would have to come into contact and be absorbed through sores or capillaries in the mouth, nose or eyes. Although the CDC does state that these are possible risk factors, we have scant evidence of this actually occurring.

To put this in perspective, even in health care, medical professionals who experience a needle stick from an HCV-positive source have only a slightly higher risk of infection than the general population. In short, yes, we need to implement safeguards to protect others and ourselves from infectious diseases, but HCV is not "very contagious." The other experts in the article state as much.

As for precautions, I disagree with some of the suggestions. For instance, routine HCV screening is rarely done in health care hiring. To institute this in diving seems unnecessary. Robert Gish, MD is by far the most knowledgeable and respected expert in this field, and I would take his recommendations to the bank. I fear that some of the other recommendations only serve to stigmatize people with HCV, and drive them further into isolation. Stigma fosters a reluctance to share one's HCV status.

I have worked in the HCV field since 1997. Although now cured, I had HCV for 24 years, and lived and worked openly with it as a nurse at Stanford and as a nationally recognized HCV educator. I believe that openness reduces fear and is the bedrock on which we create solutions. But that openness can't be forced. It arises out of solid information.

I don't know what the diver community practices, but in medicine, we know that universal precautions work. We don't practice separate precautions for those with diseases. We assume everyone; including ourselves is a potential source of infection. This keeps it simple, and keeps us safe.

Sincerely,

Lucinda Porter, RN