



# What You Need to Know Before Starting Hepatitis C Treatment

February 5, 2018 By [Lucinda K. Porter RN](#)

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These days, hepatitis C treatment usually has a successful outcome. However, sometimes treatment doesn't work, leaving patients frustrated and disappointed. Treatment failure may be due to a medication that you took during treatment which interfered with the hepatitis C regimen. Recently, studies showed that a common group of drugs may be contributing to unsuccessful treatment.

The medicines I am talking about are proton pump inhibitors (PPIs). PPIs reduce acid production in the stomach and are prescribed for a variety of conditions, such as ulcers and reflux disease. Here is a partial list of some versions of these acid-reducing drugs:

- omeprazole (Prilosec)
- lansoprazole (Prevacid)
- pantoprazole (Protonix)
- esomeprazole (Nexium)

It's quite common to need PPIs as we age. People with hepatitis C frequently take PPIs, especially if they have cirrhosis. However, if you are taking a PPI during hepatitis C treatment, you need to talk to your doctor or pharmacist.

We've known for a long time that PPIs can interfere with hepatitis C treatment. The prescribing information for direct-acting antivirals (DAAs) such as Epclusa, Harvoni, etc., clearly state the potential for interaction. Things got a little murky after a large study of veterans found that taking a PPI while taking Harvoni didn't seem to affect SVR. (Liver Meeting 2016 Abstract #831: Hepatitis C (HCV) Virologic Outcomes in Veterans Taking Ledipasvir/Sofosbuvir With Concomitant Acid Suppressing Medication – Austin Chan, et al.)

However, the veterans study was conducted in the VA system where the protocols are clearly set and followed for how to take PPIs during hepatitis C treatment. The picture is quite different when looking more broadly at the data.

In a recent article published in the Journal of Clinical and Translational Hepatology, Karn Wijarnpreecha, et al, conducted a comprehensive literature review. Among 32,684 participants

undergoing hepatitis C treatment, they found that PPIs users had a significantly increased risk of treatment failure rate compared to non-PPI users. ([Efficacy and Safety of Direct-acting Antivirals in Hepatitis C Virus-infected Patients Taking Proton Pump Inhibitors](#))

I am not sure this discussion is over yet, especially comparing the VA data to this larger, more recent data. However, if it were me, I'd really want to explore my options with my medical provider and pharmacist and, if at all possible, avoid PPI use during hepatitis C treatment. If PPIs are essential for my health, then my next choice would be to discuss my options. Here is [a link to a handout](#) published by the VA on the use of acid-reducing medications during certain hepatitis C treatments.

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