

Talking About Hep C

Before we begin

- **If you received a white card when you came in please read it and answer this question: What is the risk of Hep C with this activity?**
- **Put your white card under the appropriate sign at the front of the room**

Talking About Hep C

How to Give Clear, Compassionate and Up-to-Date Information

Eowyn Rieke, MD MPH
Outside In Clinic, Portland OR

Talking about Hep C

- Everyone should have a chance to make an informed choice about Hep C testing
- For Hep C negative people, there are specific things they can do to stay negative
- For Hep C positive people, there are specific things they can do to stay healthy
- New treatments are on the way!

What are we going to do today?

- **Practice** giving clear, compassionate and up-to-date information about Hep C
- 4 main questions:
 - Who is at risk?
 - Should I get tested?
 - What does this test result mean?
 - I have Hep C. What should I do now?

What are we NOT going to do?

- Not talk about
 - HIV and Hep C (in detail)
 - Complications of Hep C
 - Treatment details: genotypes, latest treatments
 - Politics of treatment

Talking about Hep C: Ground rules

- Be gentle with yourself
- Be gentle with others
 - Assume the best of intentions
- Participate!
- Be willing to take chances and learn
- Ask questions as we go
- Accept redirection
- What happens in Vegas. . .

Who is at risk for Hep C?

- People who inject drugs (PWID)
- Received clotting factors before 1987, blood or organs before July, 1992,
- Long-term hemodialysis
- Newborn babies with Hep C+ mother (during birth)
- Needle stick or sharps exposure
- HIV infection
- Share straws when snorting drugs
- Tattoos and body piercing
- Received transplant anytime (including sperm, skin and cornea)
- People who practice receptive anal intercourse
- People with multiple sexual partners

- Up to 1/3 Hep C+ people with no known risk factor

Who is at risk for Hep C?

- People Who Inject Drugs (PWID)
 - 27 – 93% PWIDs infected, 57% best estimate
 - 65% NEW PWIDs positive within 1st year of use
 - 70% youth share equipment in recent MA study
 - 43% even when known Hep C+ person in group
- Homeless People, 22.2 – 52.5 %
 - Study LA homeless men, 27% HCV+ and 46% were unaware
 - Study HCH clients 31% HCV+, 53% unaware
- Incarcerated People, 23.1 – 43.2 %

Is Hep C sexually transmitted?

- Documented outbreaks in sexual networks of HIV+ men who have sex with men (MSM)
- Documented transmission from HIV+ HCV+ men to female partners
- Heterosexual and homosexual people with multiple partners have higher incidence of anti-HCV
- Monogamous, heterosexual sex risk estimate 0.1% per year
 - Could be household contact blood/mucus membranes

What is the risk of. . .

Should I be tested?

Official Recommendations

- Centers for Disease Control and Prevention (CDC)
 - Injection drug use, even once
 - Chronic dialysis
 - Received clotting factors before 1987, blood or organs before July, 1992
 - Born to HCV+ mother
 - Known exposure (needle stick, organ transplant Hep C+)
 - Chronic liver disease
 - NEW: everyone born 1945-1965 one lifetime test

Should I be tested?

Philosophical Considerations

- Will a positive test change anything?
 - Drug use (including alcohol), sharing drug equipment, using condoms. . . .
- Will a negative test change anything?
 - Drug use (including alcohol), sharing drug equipment, using condoms. . . .
- Can we know for sure the impact of test results?

All people, regardless of housing, substance use and all other factors should have the opportunity to make an informed choice about Hepatitis C testing.

Talking about Hep C

What specific language do you use when introducing the topic of Hep C?

Talking about Hep C: Testing

- Find a buddy
- Decide who will be
 - client/patient
 - counselor/provider/friend
- You will have 3 minutes to discuss testing for Hep C in these roles, followed by 2 minutes for feedback.
- During feedback focus on these questions:
 - Client: What worked well for you?
 - Counselor: What would you do differently?

Talking about Hep C: Testing

- Client has been coming to this homeless youth drop-in center for about 3 months, recently started hanging out with a group of people who inject drugs and has noticeable new track marks on their arms
- Take a moment to think about who you are in this scenario, and do whatever you need to focus, calm, center
- Start when the bell rings

Feedback

Client:

What worked well for you?

Counselor:

What would you do differently?

Talking about Hep C: Testing

- Client is an older homeless person, 20 years ago injected heroin regularly, current drug of choice is alcohol.
- Take a moment to think about who you are in this scenario, and do whatever you need to focus, calm, center
- Start when the bell rings

Talking about Hep C: Testing

What worked well?

What were the challenges?

So you do the test. . .

Which test?

- Anti-HCV
 - Not a direct measure of current infection
 - Measures antibodies
 - 15% of people will clear virus and have no infection, but Anti-HCV will be positive forever
 - Babies 0 – 18 months special case
 - Cost \$20-30
- HCV RNA, aka PCR
 - Measures presence of the virus in blood
 - Cost over \$200
- RIBA: rarely done, usually to confirm other tests

What does a negative test mean?

- Could be too early
 - Anti-HCV test may not change to positive for up to 6 months after getting the virus, usually within 2 months
- Could be immune suppressed, esp HIV
 - Anti-HCV may never be positive
 - Have to check Hep C RNA
- Could be uninfected
 - Opportunity for prevention

I'm Hep C negative, how can I keep it that way?

- If PWID: never share equipment
 - Cookers, water, filters AND syringes can all transmit virus
 - Hep C virus can live 3 weeks in a bottle of water and 8+ weeks in a used syringe!
- Be careful around other people's equipment: avoid accidental sticks!
- Do not share personal items: razors, toothbrushes
- Do not get home-made tattoos or piercings
- Use barrier method for sex if you:
 - practice receptive anal intercourse
 - have sex with Hep C+ person during their menstruation

What does a positive test mean?

- Chronic infection: positive PCR test at least 6 months after infected
 - 75-85% will **not** have serious liver disease from Hep C
 - Most people have some symptoms including fatigue, joint and muscle pains, rashes and itchy skin
 - 15 – 25% will progress to serious liver disease including cirrhosis and liver cancer
 - Usually 20+ years after infection

I have Hep C, what can I do to stay healthy?

- Reduce or eliminate alcohol
- Reduce or eliminate marijuana
- Healthy diet and moderate exercise
- Coffee 3+ cups a day can be beneficial
- Caution with medications, prescribed and over the counter
 - Acetaminophen (Tylenol) 2 g/day max
- Hep A and B vaccines; consider pneumonia and flu
- Avoid “another” Hep C infection
- Acupuncture for maintenance and possibly cure
- Herbs
 - Chinese and Japanese herbs with some evidence of response
 - Milk thistle: safe and likely will benefit
 - Licorice: also with promise

I have Hep C, what can I do to keep from passing to anyone else?

- Don't share injection equipment, even with other people with Hep C
 - Cookers, water, cottons
- Properly dispose of any used injection equipment
 - Sharps containers, syringe exchange
- Use condoms
- Don't share razors, toothbrushes
- Clean up blood spills
- Keep any cuts covered
- Get abscess care in a safe and clean place

I have Hep C, can I get treatment?

- YES! But. . .
 - Expensive
 - Complicated treatment and serious side effects
 - Not always available
 - Not always effective

- More on this later

Talking about Hep C: Test Results

- Find your scenario buddy
- Choose your role for first round:
 - client/patient
 - counselor/provider/friend (your real life role)
- You will have 3 minutes to discuss results of Hep C testing in these roles, followed by 2 minutes for feedback.
- During feedback focus on these questions:
 - Client: What worked well for you?
 - Counselor: What would you do differently?

Talking about Hep C: Test Results

- One of your well known clients has just received a negative Hep C RNA test result. This person regularly injected drugs in the past, and occasionally does now. They last injected 4 months ago.
- Take a moment to think about who you are in this scenario, and do whatever you need to focus, calm, center.
- Start when the bell rings

Feedback

Client:

What worked well for you?

Counselor:

What would you do differently?

Talking about Hep C: Test Results

- One of your clients recently received a positive Hep C test result. The test was the Anti-HCV test, but the client is pretty sure they have Hep C because they have shared needles with a friend who has Hep C
- Take a moment to think about who you are in this scenario, and do whatever you need to focus, calm, center.
- Start when the bell rings

Feedback

Client:

What worked well for you?

Counselor:

What would you do differently?

Can I get treatment for Hep C?

- Expensive: Thousands of dollars, sometimes not covered by insurance
- Complicated: 24-48 weeks, lots of severe side effects
- Not always effective: Depends on genotype, age
- Not always available: Need to be clean and sober x 6 months

- **NEW TREATMENTS**
- All oral treatments in research studies now
- Show increased response, even with hardest to treat people and genotypes
- Reduced side effects

How can I prepare for treatment?

- Get or stay clean from drugs and alcohol
- If you could get pregnant or get someone pregnant, start using 2 forms of contraception
- Work on any mental health problems you have through counseling, medications

Talking about Hep C

- Everyone should have a chance to make an informed choice about Hep C testing
- For Hep C negative people: there are specific things they can do to stay negative
- For Hep C positive people: there are lots of things they can do to stay healthy
- New treatments are coming!

Talking about Hep C

- Additional Resources
 - CDC: *Know More Hepatitis* www.cdc.gov/knowmorehepatitis
 - HIV and Hepatitis website <http://www.hivandhepatitis.com>
- Eowyn Rieke
 - Outside In Clinic, Portland OR
 - eowynr@outsidein.org 503 535-3860

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