So you have hepatitis C, what’s next?
Your doctor will now send you for a liver scan (also known as a Fibroscan) which provides information about the health of your liver.

This fifteen minute procedure sends a painless pulse through your liver and records how stiff or damaged your liver is. There are no side effects or complications, and your liver nurse can discuss the results with you.

What do the results mean?
You will be provided with one of the following results:

- **Minimal or Mild fibrosis:** You have a healthy liver with no or small amount of scarring on the liver.
- **Moderate or severe fibrosis:** You have a fair amount of scarring on the liver.
- **Cirrhosis:** Your liver is very scarred, which may cause your overall health to deteriorate.

If you have severe fibrosis or cirrhosis you will be referred to your specialist service, in all other cases your GP can manage and treat your hepatitis C.

Treatment
One combination of direct acting-antivirals (DAAs) is now funded in New Zealand to treat patients infected with hepatitis C genotype 1 with compensated liver disease. 12 weeks of tablets has a cure of >95 percent, with fewer side effects compared to previous treatments.

The DAA medication is:
- **Viekira Pak** with or without Ribavirin, is funded for people who have hepatitis C genotype 1. In most cases treatment length is 12 weeks. Please visit your GP or specialist to discuss.

- If you have genotype 2, 3, 5 or 6 infection then this treatment will not work. You can self-fund generic DAAs for personal use for around $2000.
- If you are interested in this option please visit www.fixhepc.com and discuss with your specialist.
- New DAAs which work against all genotypes are expected to be funded within the next few years.

For those patients with very advanced liver failure from cirrhosis, another DAA combination called **Harvoni** (Ledipasvir and Sofosbuvir), is funded, regardless of genotype. It is only available through the hospital and is prescribed with Ribavirin for 12 weeks.

Why is the liver important?
The liver is the largest organ inside the body. It is located behind the ribs, in the upper right-hand part of the abdomen.

The liver performs over 500 functions, including:
- Processing food products.
- Storing vitamins, sugar and iron.
- Controlling the production and removal of cholesterol.
- Clearing the body of waste products and toxins.
- Producing clotting factors to stop excess bleeding.
- Removing bacteria from the blood to combat infection.

For further information:
https://www.healthnavigator.org.nz/health-a-z/h/hepatitis-c/ or phone 0800 33 20 10
Hepatitis C causes inflammation of the liver. The virus is spread through blood-to-blood contact.
No vaccination is currently available, but, in many cases, hepatitis C can now be cured.

What is hepatitis C?
Hepatitis C is a blood-borne virus that can damage the liver. The virus causes inflammation of the liver, which can affect the way the liver functions. Currently, there is no vaccine to prevent hepatitis C infection. However, in many cases, it can be cured.

How common is chronic hepatitis C?
An estimated 50,000 people have chronic hepatitis C in New Zealand. However, only 60-70 percent are aware they have the virus.

Who is at risk of hepatitis C?
Hepatitis C is spread through blood-to-blood contact. Therefore…
- Have you ever injected drugs?
- Have you ever been in prison?
- Have you ever had a tattoo or piercing?
- Did you ever receive a blood transfusion before 1992?
- Have you ever had jaundice, hepatitis, abnormal liver tests?

What are the symptoms?
Although symptoms of liver failure are only seen in people with end-stage liver disease. Most people infected with hepatitis C will have nonspecific symptoms of tiredness (fatigue), joint pains, loss of appetite, nausea or mood changes which have been attributed to other causes. However, these symptoms rapidly disappear after successful HCV treatment.

What can happen to people with chronic hepatitis C without treatment?
- For every 100 people infected with hepatitis C:
  - 80 people will develop chronic infection
  - 25 people will develop cirrhosis (severe scarring of the liver)
  - 3-5 people will die of liver cancer
- Do not share piercing, tattooing or drug injecting equipment.
- Clean up spilt blood with household bleach (one part bleach to nine parts water). Do not put bleach on skin.
- Do not donate blood.

Hepatitis C cannot be spread through social contact i.e. touching, kissing, sneezing, coughing or sharing cutlery.
Hepatitis C is not a sexually transmitted disease and condoms are not needed unless there is risk of blood-to-blood contact.

What do the blood tests mean?
Three blood tests are required to diagnose chronic hepatitis C and determine your eligibility for funded treatment.
- Antibody test (anti-HCV): The first blood test looks for antibodies and confirms whether you have ever been in contact with the hepatitis C virus. If this test is positive, it doesn’t necessarily mean you are currently infected with hepatitis C, it does mean you have been infected at some point.
- PCR test: The second blood test - the polymerase chain reaction (PCR) test - confirms if the virus is currently present, and whether you have hepatitis C
- HCV genotype: The third blood test which determines the strain of hepatitis C. Only HCV genotype 1 is suitable for treatment with the PHARMAC-funded VIEKIRA PAK.

How to avoid infecting others?
Many things can be done to avoid infecting others:
- Cover any sores or cuts.
- Do not share razors or toothbrushes.
- Avoid sexual practices that might risk blood contact.

*Your GP can refer you for these blood tests which in most cases will require a single blood sample to test for all three.