

Hepatitis C

Infection with hepatitis C virus (HCV) causes both acute and chronic hepatitis C disease. HCV is found in the blood of persons who have the disease. The most common signs and symptoms of acute hepatitis C include jaundice, fatigue, dark urine, abdominal pain, loss of appetite and nausea. However, 80% of persons are asymptomatic. Acute hepatitis C cases are underreported due to the fact that most persons are asymptomatic and that laboratories cannot distinguish between acute and chronic HCV infection. Hepatitis C can lead to liver damage and sometimes death due to cirrhosis and liver cancer. In the United States, an estimated 2.7–3.9 million people are infected with hepatitis C virus. Chronic liver disease develops in up to 70% of chronically infected persons. Hepatitis C infection is the leading indication for liver transplant. Deaths from hepatitis C-related chronic liver disease have been increasing since 1999; in 2007, more than 15,000 people in the United States died as a result of hepatitis C. There is no vaccine for hepatitis C.

Hepatitis C is spread from one person to another primarily by direct contact with human blood. Most infections are due to illegal injection drug use. The virus can also be transmitted through sexual contact and from infected mothers to their infants at the time of birth. The risk for perinatal HCV transmission is approximately 4%. If the mother is coinfecting with HIV, the risk for perinatal infection increases to approximately 19%. Since the adoption of routine blood donor screening in 1992, transfusion-associated cases now occur less than 1 per 2 million units of blood transfused. Cases can occur in health care settings, most commonly related to improper reuse of syringes or multidose vials.