Hepatitis C

Hepatitis C virus (HCV) is a bloodborne infection that may cause both acute and chronic hepatitis C. The most common signs and symptoms of acute hepatitis C include jaundice, fatigue, dark urine, abdominal pain, loss of appetite and nausea. Acute hepatitis C cases are underreported because 80% are asymptomatic, and laboratories cannot distinguish between acute and chronic HCV infection. Chronic 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 HCV. Chronic liver disease develops in up to 70% of chronically infected persons, and hepatitis C 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 from it. There is no vaccine for hepatitis C.

Hepatitis C is spread from one person to another primarily by percutaneous exposure to human blood; most infections are due to illegal injection drug use. Uncommonly, 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 co-infected with HIV, the risk for perinatal infection increases to approximately 19%. Since the adoption of routine blood donor screening in 1992, HCV is transmitted less than one time for every 2 million units of blood transfused. Cases can occur in health care settings, most commonly related to improper reuse of syringes or multidose vials.