

10.8 HEPATITIS C

TITLE	DESCRIPTION
DEFINITION:	<p>Hepatitis C is a liver infection caused by the Hepatitis C virus (HCV). HCV is a blood borne virus. Today, most people become infected with HCV by sharing needles or other equipment to inject drugs. For some people, HCV is a short-term illness but for 70-85% of people who become infected with HCV, it becomes a long-term, chronic infection. Chronic HCV is a serious disease that can result in long-term health problems, even death. The majority of infected persons might not be aware of their infection because they are not clinically ill. There is no vaccine for HCV. The best way to prevent HCV is by avoiding behaviors that can spread the disease, especially injecting drugs. Hepatitis C is considered a reportable condition in the state of Montana.</p>
SUBJECTIVE:	<p>Must Include</p> <ol style="list-style-type: none"> 1. Sexual Health Assessment. 2. Immunization History. <p>May Include:</p> <ol style="list-style-type: none"> 1. Complete medical, family, and social history. 2. Symptoms may include: fatigue, fever, joint and muscle pain, abdominal pain, loss of appetite, itchy skin, dark colored urine, clay-colored stool and nausea and vomiting. 3. Groups at risk for HCV infections: <ol style="list-style-type: none"> a. IV drug use (currently the most common means of HCV transmission in the U.S.). b. HIV infected individuals. c. Transfusions and organ transplants received before July 1992. d. Intranasal cocaine use. e. Sharing personal items with an infected person. f. Tattooing and body piercing. g. High-risk sexual activity. h. Clotting factors received before 1987. i. Occupational exposures – health-care worker with needle exposure. j. Mother-to-infant contact (rare, but still considered a risk). k. Individuals having signs and symptoms of liver disease.
OBJECTIVE:	<p>May Include:</p> <ol style="list-style-type: none"> 1. Asymptomatic but with high risk history. 2. Jaundice, hepatomegaly. 3. Abnormal liver function test.
LABORATORY:	<p>HCV screening is recommended for persons with a high-risk history or symptoms suggestive of HCV infection. The CDC recommends one-time HCV testing for adults born between 1945 and 1965 regardless of HCV risk.</p>
ASSESSMENT:	<p>Hepatitis C Infection: acute or chronic.</p>
PLAN:	<ol style="list-style-type: none"> 1. Persons confirmed to be HCV positive should be evaluated by referral. 2. Offer vaccination for Hepatitis A and B if non-immune. There is no vaccine for

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	<p>Hepatitis C.</p> <ol style="list-style-type: none"> 3. Offer HIV testing and other STI testing as indicated. 4. No post-exposure treatment with immune globulin is effective in preventing HCV infection. 5. An acute case or flare-up of HCV is category 3/4 for initiation of combined hormonal contraceptives and a category 2 for continued use of combined hormonal contraceptives in the current U.S. Medical Eligibility Criteria for Contraceptive Use. Progestin-only methods or Paragard IUC are category 1 during an acute or flare-up of HCV.
EDUCATION:	<ol style="list-style-type: none"> 1. To reduce the risk for transmission to others, the HCV positive person should be advised to not donate blood, body organs, or semen. Reinforce the risk of transmission for HCV positive can occur without the symptoms of infection. 2. Not to share any personal items that might have blood on it. 3. Cover cuts and sores on the skin. 4. HCV positive persons with long term steady sex partner do not need to change their sexual practices. 5. HCV positive women do not need to avoid pregnancy or breastfeeding. 6. Counsel all HCV positive clients regarding the increase risk of liver disease with alcohol use.
REFERRAL TO MEDICAL PROVIDER:	<ol style="list-style-type: none"> 1. Persons confirmed to be HCV positive should be evaluated by referral. 2. Referral if history is suggestive of alcohol/substance abuse. 3. Referral for counseling, as needed.
REFERENCES:	<ol style="list-style-type: none"> 1. Centers for Disease Control and Prevention. Sexually Transmitted Diseases Treatment Guidelines, 2015. MMWR Recomm Rep 2015;64 (No.RR-3): Pp. 17-20. (https://www.cdc.gov/std/tg2015/tg-2015-print.pdf). 2. Viral Hepatitis. (https://www.cdc.gov/hepatitis/hcv/index.htm). 3. Hepatitis C. (www.medlineplus.gov/ency/article/000284.htm).