

The Top 12 Questions about hepatitis C

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1. How likely is it that I have hepatitis C?

In blood-to-blood transmission, the hepatitis C virus (HCV) is three times as infectious as HIV. Seventy to eighty percent of injecting users have it. Anyone who has ever had an unsafe injection has run the risk of infection, and someone who has become infected with HIV through a dirty needle is highly likely to have HCV as well.

2. Could I have hepatitis C even if there doesn't appear to be anything wrong with me?

Yes, it's possible. Many people are HCV+ without being aware of it. Most of them start suffering from vague symptoms such as tiredness and listlessness only many years later.

3. Can I die from hepatitis C?

Sometimes hepatitis C gets better of its own accord, and many people who have it live to a ripe old age. No-one dies of the virus itself, but a small proportion of infected people develop cirrhosis of the liver some fifteen to twenty years after infection. In these cases, more and more liver functions begin to fail until ultimately the patient starts getting serious haemorrhages and infections, then goes into a coma and dies. Cirrhosis can also turn into liver cancer.

4. Is there more risk of getting hepatitis C if I have already had another type of hepatitis?

The seven kinds of viral hepatitis now known are all distinct liver diseases. One type does not change into another. Having once been infected with one of the other six types does not increase your chance of getting hepatitis C, but it does not afford you any protection against it either. Thus if you do get hepatitis B through an unsafe injection, there is a real chance you could become infected with HCV at the same time.

5. Is there a link between HCV and HIV?

Both viruses can be transmitted by dirty needles. That is why many HIV+ drug users are also HCV+. A double infection of this kind can also cause earlier and more severe liver disease. The chances of curing it with interferon are relatively small and a liver transplant is not possible. There is also greater risk of crossinfection from mother to baby.

6. What can I do to look after myself if I believe or know I have hepatitis C?

Be kind to your liver. Giving up alcohol is a major step in the right direction. Take care with medicines and other drugs too. Eat a healthy diet, get plenty of sleep, avoid stress and try to lead a stable, regular life.

7. Am I eligible for treatment with interferon?

Your GP can refer you to a specialist for interferon treatment. National health insurance might pay for it. The fact that you are a drug user is not supposed to debar you from treatment.



8. How can I avoid a hepatitis C infection?

Avoid any contact in which blood could be exchanged. Inject safely: never share needles, barrels, filters, rinsing water or spoons. Any used injecting equipment could carry traces of blood. Always make sure you have your own equipment with you.

9. If I am already HCV+, can I get infected again?

Even if you are HCV+ you can still get infected by another variant of hepatitis C. This will cause a resurgence of the hepatitis and your health will deteriorate more rapidly. So do be sure to avoid new infections.

10. Can I get hepatitis C by kissing?

No, touching or kissing a HCV+ person is perfectly safe. It's also safe to share anything other than razors, toothbrushes or anything else which could become contaminated with blood.

11. Can I get hepatitis C through unsafe sex?

Research shows that Hep C is not currently believed to be sexually transmitted.

12. If I am pregnant and have hepatitis C, am I likely to infect the baby?

The chance of transmitting HCV to your baby is probably very low. But if you have both HCV and HIV, the chance of your baby becoming infected with hepatitis C is greater.

For more information on Hepatitis C in prison, make reference to:

Robaey G., Arain A., Stöver H. (2017) Hepatitis C Viral Infection in Prisons. In: Elger B., Ritter C., Stöver H. (eds) Emerging Issues in Prison Health. Springer, Dordrecht

