TRAINING MANUAL FOR TREATMENT ADVOCATES HEPATITIS C VIRUS & COINFECTION WITH HIV **Treatment Action Group**

SECTION 1: ABOUT HEPATITIS

TAG

Hepatitis means "swollen liver"

Many things can cause your liver to become swollen, including

- drinking a lot of alcohol;
- taking certain medications or herbs;
- inhaling toxic fumes;
- autoimmune diseases that cause the immune system to attack healthy tissue in the body; or
- infections, including viral hepatitis.

Viral Hepatitis

There are six different types: A, B, C, D, E, and G.

- Each of these viruses acts differently
- Most people who have viral hepatitis don't know it, most don't have any symptoms
- But some people do have jaundice (yellow skin and eyes), appetite loss, nausea, vomiting, dark urine and pale stool, fever, aches, fatigue, and liver or abdominal swelling



Hepatitis A (HAV)

- Usually not serious, but it can make some people feel very ill
- Transmitted through feces (stool, shit) from a person with HAV getting into your mouth
 - Contaminated water, eating raw fish, improperly washed fruit/ vegetables, mouth-to-anus play
- There is a preventative vaccine
- There are no treatments because the body usually clears the virus by itself
- Most people will recover without treatment
- It rarely causes liver damage
- HAV is very rarely fatal



Hepatitis B (HBV) and Hepatitis C (HCV)

- Two of the most serious hepatitis viruses
- Transmitted through blood, semen, and sometimes vaginal and rectal fluid
 - Sharing unclean injection equipment, cookers, cotton, tattoo equipment, tattoo ink, and inkwells; needlestick accidents or other occupational exposures; unprotected sex with someone who has HBV or HCV; improperly sterilized medical and dental equipment; mother-to-child during birth; and sharing personal care items that may have blood on them, such as toothbrushes and razors.
- There is a preventative vaccine for HBV, but not for HCV
- Some people can clear HBV and HCV without treatment
- But most will become chronic (lifelong) infections
- Treatments are available, and some people can even be cured
- Not everyone with chronic HBV or HCV will need treatment due to spontaneously clearing the virus
- Some people will develop serious liver damage, liver cancer, or liver failure if they go without treatment, although this takes many years
- Most deaths from liver disease are caused by chronic HBV and HCV



Hepatitis D (HDV)

- Only happens in people who already have HBV
- Some people may have been infected with both viruses at the same time
- A person cannot get HDV unless they already have HBV
- 20% of people will clear HDV without treatment
- 80% will develop chronic HDV infection
- HDV worsens HBV, and can lead to cirrhosis (serious liver scarring that can lead to liver failure) or sudden liver failure



Hepatitis E (HEV) and Hepatitis G (HGV)

- HEV is transmitted through water contaminated by feces or through un-cooked or under-cooked meat
- HEV goes away without treatment, and often has no symptoms
- Usually not serious, but can become life-threatening during pregnancy, particularly in the third trimester
- HGV is transmitted through contaminated blood or blood products, unsterile drug use, injection or tattoo equipment
- HGV, often called GB virus C (GBV-C), does not make people sick or cause liver damage

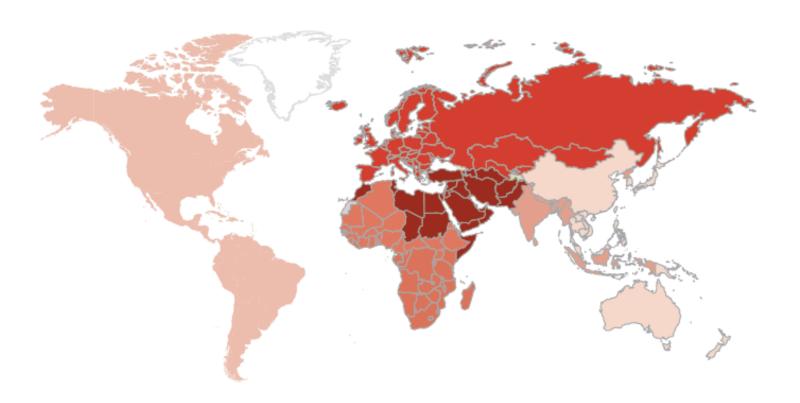


Viral Hepatitis Can Cause Serious Liver Disease

- Chronic HBV and HCV are "silent" illnesses
- Usually, people do not have symptoms until they have serious liver damage, which takes many years to develop
- Many deaths from serious liver disease can be prevented with earlier diagnosis and treatment
- Learning more about viral hepatitis and sharing the information with your community can help save lives



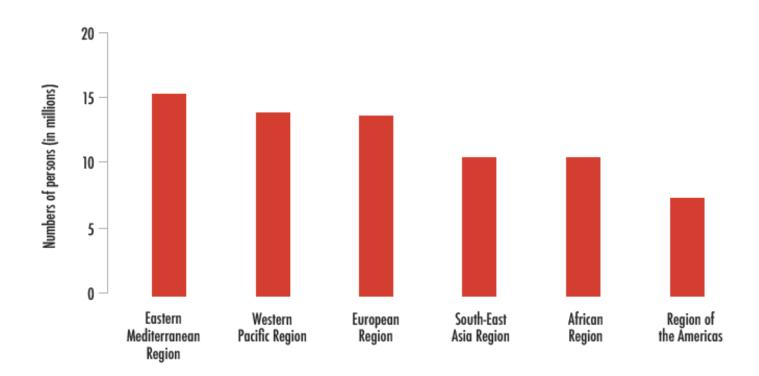
GLOBAL HCV PREVALENCE: Who Has It?



Map 1. Global HCV Prevalence: Estimated **71 million people** living with chronic HCV

• 400,000 people die each year from advanced liver disease & liver cancer

GLOBAL HCV PREVALENCE: Who Has It?



Source: WHO. Global Hepatitis Report. Geneva: WHO; 2017 April, pp.13-4.

Figure 1. Prevalence of HCV infection (RNA confirmed positive) in the general population, by WHO region, with uncertainty intervals (in 2015)

GLOBAL HCV PREVALENCE: Who Has It?

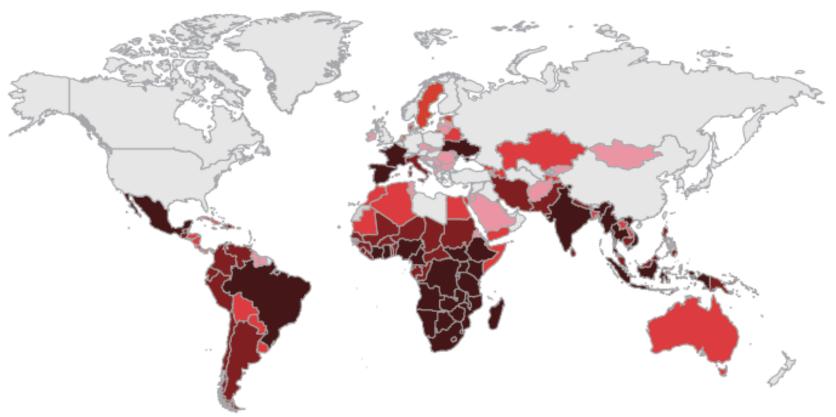
	Estimates of the prevalance of HCV infection (%) Uncertainty interval			Estimated number of persons living with HCV (millions) Uncertainty interval		
WHO region						
	Best	Lower	Higher	Best	Lower	Higher
African Region	1.0	0.7	1.6	11	7	16
Region of the Americas	0.7	0.6	0.8	7	6	8
Eastern Mediterranean Region	2.3	1.9	2.4	15	13	15
European Region	1.5	1.2	1.5	14	11	14
South-East Asia Region	0.5	0.6	0.8	10	8	18
Western Pacific-Region	0.7	0.6	0.8	14	10	15
Total	1.0	0.8	1.1	71	62	79

Table for Figure 1. Prevalence of HCV infection (RNA confirmed positive) in the general population, by WHO region, with uncertainty intervals (in 2015)



GLOBAL HIV PREVALENCE: Who Has It?

Map 2. Global HIV Prevalence: Estimated **36.7 million people** living with HIV







GLOBAL PREVALENCE OF HIV/HCV COINFECTION

- 2.3 million (6.2%) of 36.7 million people living with HIV are coinfected with HCV
- 1.36 million people who inject drugs have become infected with HCV and/or HIV
- In countries where injection drug use is the biggest risk factor for HIV transmission, as many as 7 in 10 people living with HIV are coinfected with HCV
 - These include countries in Asia, Eastern Europe, and the Middle East
- HCV prevalence is 6.4% among men who have sex with men
- HCV prevalence is 2.4% in people living with HIV who do not engage in behaviors that involve transmission of HCV-infected blood



HCV IN THE UNITED STATES

- Not enough info on number of people have HCV in US
- Lack of reliable data & weak monitoring/surveillance system
- CDC estimate: 3.2 million people living with chronic HCV
- Prevalent among "baby boomers" (born between 1945-1965)
 - Infection likely occurred before blood screening & identification of virus
- 20,000 HCV-related deaths each year
- More common among people with less than 12 years of education, and who live below the poverty line, regardless of race or ethnicity



Young People Who Inject Drugs

- Sky-rocketing use of heroin and synthetic opioids in US
 - Stigma, risk of arrest, sharing of unsterilized needles and drug paraphernalia puts people at risk of HIV and HCV transmission
- Result = largest increases of new HCV infections among young people who inject drugs
- Leading cause of death for Americans under age 50 = opioidrelated overdoses
- Expanded harm reduction programs, safe consumption spaces, access to clean syringes & other materials for individual use:
 - Prevent HCV transmission
 - Prevent overdoses
 - Provide medication-assisted treatment (opioid substitution [OST])
 - Increase access to HIV & HCV treatment and care

HCV and People of Color in the United States

- Overall, an estimated 1.8% of people in the United States have been infected with HCV
 - Other studies: 997,000 people tested positive for HCV antibodies
- Hepatitis C is more common among African-Americans than Mexican Americans or White Americans – both men & women
 - Homeless and incarcerated people, who have high rates of HCV, were not included in NHANES survey, nor was other information about race or ethnicity
 - Antibody prevalence: 32.1% among homeless people, 11.5% among Native Americans, 4.5% among nursing home residents, 0.48% among active military personnel
 - Rates were twice as high in African Americans versus whites (3.2% vs. 1.5%)
- The highest rates of HCV were found among African-American men between 40 and 49 years of age (13.4%), and Mexican American men between 50 and 59 (10%)



HCV and Incarceration

- 10.2 million people incarcerated worldwide
 - US has highest rate in the world: 2.3 million people in prisons & jails (youth/juveniles not reflected in these figures)
- Lack of clean syringes, OST, condoms, limited testing & treatment, overcrowding contribute to transmission of HIV, HCV, TB
- Compulsory detention centers, inhumane conditions in some countries fuel substance use disorders & infectious diseases
- 15.1% (1.53 million) of prisoners living with HCV but no treatment
- Treating substance use as public health issue, including ending war on drugs, shown to reduce incidence of HIV, possibly HCV
- Prisons are potential sites for treatment and linkage to care



ADVOCACY EXERCISE

Discussion Questions:

- 1. Do you know someone who has gotten sick from viral hepatitis?
- 2. Do you know if you've been vaccinated against HAV and HBV?
- 3. Does your government offer HCV testing and treatment to key populations such as prisoners in your country?

Action Steps:

- 1. How can you use this training manual to share information about viral hepatitis with others in your community?
- 2. Do you know how to find more information about HCV in your country or region?
- 3. Have there been any campaigns to widen access to HCV treatment for key populations in your country?