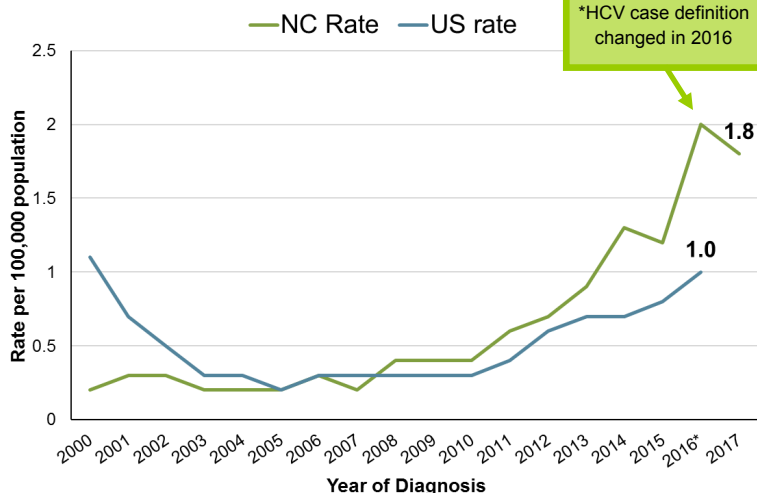


Hepatitis C in North Carolina, 2017

Hepatitis C is on the Rise in North Carolina



Acute Hepatitis C Infections, 2000-2017



Acute hepatitis C

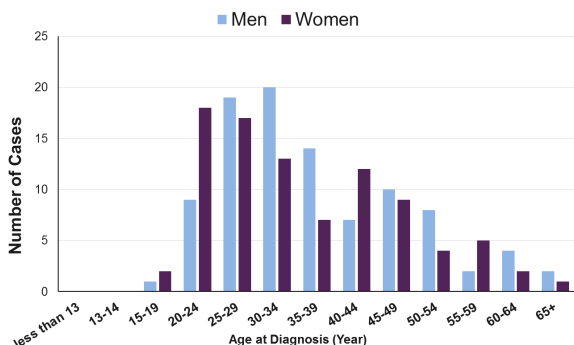
- There were 186 newly diagnosed acute hepatitis C cases in 2017, a five-fold increase from 2007.
- Between 70-85% of acute infections will progress to a chronic infection.

Chronic hepatitis C

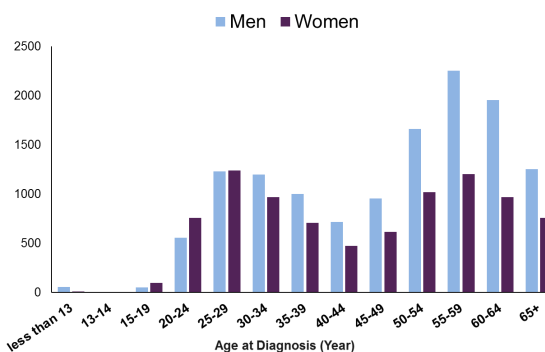
- An estimated 110,000 North Carolinians are infected with hepatitis C.
- Chronic hepatitis C became reportable in NC in late 2016.
- As of 12/31/2017, there were 21,757 reported cases of chronic HCV.

The majority of people newly infected with Hepatitis C (people with acute cases) are young people.

Acute Hepatitis C



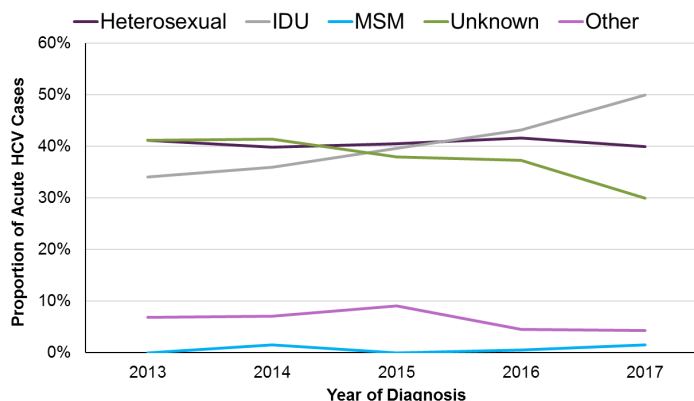
Chronic Hepatitis C



- The majority of acute hepatitis C occurred within the 20-34 age group (rate: 13.9 per 100,000).
- Both young people and older people can have chronic hepatitis C; the high case numbers among young people for both acute and chronic hepatitis C mean that hepatitis C is currently spreading among younger people.

Injecting drug use is a growing risk factor for Hepatitis C

- The rise of injection drug use (IDU) has been a growing risk factor for hepatitis C. In 2017, IDU was reported by 47% of people diagnosed with acute HCV.
- Coinfection with hepatitis C and HIV or hepatitis B is common; people diagnosed with HIV or hepatitis B should be screened for hepatitis C.



*People may report more than one risk, so totals may not add up to the case total. Other risk includes: healthcare exposure, or contact with an individual who is HCV positive.

Want More Information?

NC HCV Facts and Figures website:
<https://epi.publichealth.nc.gov/cd/stds/figures.html>

Centers for Disease Control and Prevention (CDC) Fact Sheet on HCV:
<https://www.cdc.gov/hepatitis/hcv/>

Contact Us

North Carolina DHHS
 Communicable Disease Branch

Phone:
 (919) 733-3419

Mailing Address:
 Communicable Disease Branch
 Epidemiology Section
 1902 Mail Service Center
 Raleigh NC 27699-1902

Created by the HIV/STD/Hepatitis Surveillance Unit and the Viral Hepatitis Prevention Unit, Communicable Disease Branch 12/10/2018

Hepatitis C in North Carolina, 2017



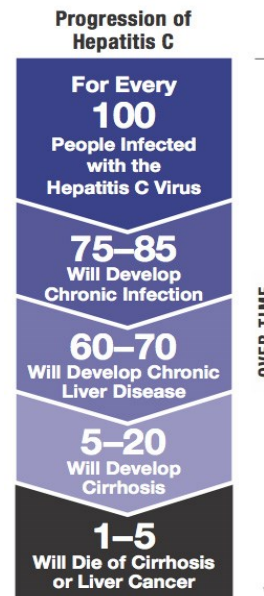
Hepatitis C Causes and Symptoms

Typically, symptoms occur 2-12 weeks after exposure (in about 20% to 30% percent of newly exposed persons), they can include fever, abdominal pain, loss of appetite, nausea, vomiting, fatigue, jaundice and dark urine.

Hepatitis C is a liver disease caused by the Hepatitis C virus (HCV). The acute form of the infection is a short-term illness that occurs within the first six months after someone is exposed to the virus.

For most people (75%-85% of infected persons), acute infection leads to lifelong (chronic) HCV infection, which can result in severe liver disease, liver damage, liver cancer and even death.

Persons with hepatitis C should be vaccinated against hepatitis A and B.



CDC Hepatitis C Treatment Guidelines:

<https://www.cdc.gov/hepatitis/hcv/index.htm>

Data Source:

North Carolina Electronic Disease Surveillance System (NC EDSS) (data as of June 3, 2018). Progression of Hepatitis C image: <http://www.hepfi.org/HEPATITIS/Hepatitis-C.html>

State of North Carolina • Roy Cooper, Governor
Department of Health and Human Services • Mandy Cohen MD, MPH, Secretary
Division of Public Health • Beth Lovette, Acting Division Director
HIV/STD/Hepatitis Surveillance Unit • Erika Samoff, MPH, PhD
www.ncdhhs.gov • www.publichealth.nc.gov

N.C. DHHS is an equal opportunity employer and provider.

North Carolina CHAMP:

Contact: Anthony Hannah (919)546-1697

<https://www.med.unc.edu/champ>

North Carolina HMAP:

<https://epi.publichealth.nc.gov/cd/hiv/hmap.html>

Created by the HIV/STD/Hepatitis Surveillance Unit and the Viral Hepatitis Prevention Unit, Communicable Disease Branch 12/10/2018

How is it transmitted?

- ◆ Hepatitis C is spread when blood from an infected person enters the body of another person.
- ◆ Reinfection of hepatitis C is possible.
- ◆ This can occur through sharing needles or "works" when injecting drugs, or through an occupational needle-stick exposure.



Who is at risk?

- ◆ People who use drugs, past or present
- ◆ Sexual partners of drug users
- ◆ People who had blood transfusions, blood products, or organ donations before July 1992
- ◆ People who received clotting factors before 1987
- ◆ People who are HIV positive
- ◆ People with a history of incarceration
- ◆ People born between the years of 1945-1965
- ◆ Children born to HCV-positive mothers who tested positive for Hepatitis C

PREVENTION and TREATMENT

- ◆ There is no vaccine to prevent HCV infection, but there is a **CURE**.
- ◆ Prescribing providers are able to treat for HCV To learn more about the North Carolina Academic Mentorship Program (CHAMP) (resources in side bar).
- ◆ Major insurers and patient assistance programs can pay for HCV treatment. Ask your medical provider for more information. If you are HIV-positive, the HIV Medication Assistance Program (HMAP) could help (resources in sidebar).
- ◆ Risk-based testing for hepatitis C is available through all local health departments at no cost.
- ◆ People with HCV infection should NOT be excluded from work, school, child care, play, sports or other settings based on their HCV infection status as Hepatitis C is NOT spread through casual contact.
- ◆ Never share drug use equipment; instead, utilize syringe access programs, and clean surfaces with 10% bleach solution.