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.

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.

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/

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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.

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.