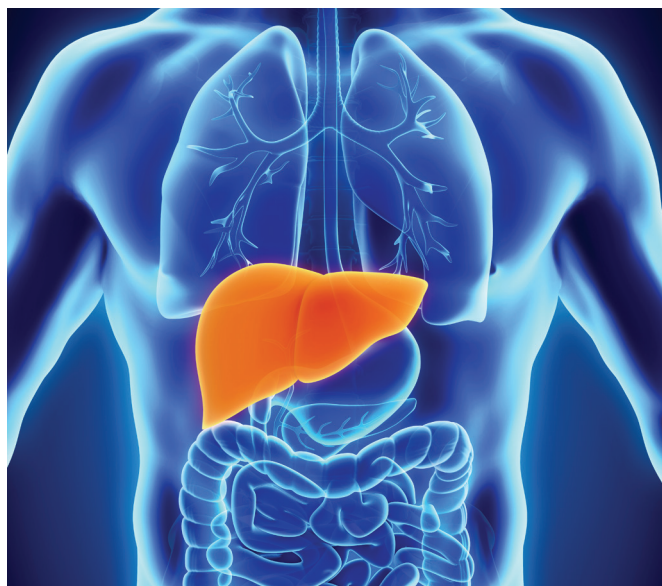




Hepatitis C Virus (HCV)

Information for patients

This leaflet explains hepatitis C, how you might have caught it, its main symptoms and how it can be treated. If you have any questions or concerns, please talk to a member of our team of liver specialists. We are a dedicated group of doctors, nurses and pharmacists.



What is Hepatitis C?

Hepatitis C (HCV) is a virus that can affect your liver. It is found in blood, so to become infected your blood needs to come into contact with blood from another person with the virus.

If you have come into contact with hepatitis C within the past six months, this is known as acute HCV. Around 1 in 5 people clear hepatitis C without treatment. If this doesn't happen it becomes chronic HCV.

What are the symptoms of Hepatitis C?

Most people with acute hepatitis C do not have any symptoms. But you may have vague symptoms such as fatigue, loss of appetite, joint pains or nausea.

It is possible to have chronic hepatitis C and remain well for life without any symptoms. But sometimes, if left untreated, you may experience the following:

- stomach problems and / or weight loss
- muscle aches and joint pains
- tiredness
- brain fog (unable to concentrate)
- nausea
- depression
- alcohol intolerance
- pain over your liver (right upper abdomen)
- jaundice, where your skin and the whites of your eyes become yellow, your urine becomes dark and your stools (poo) become pale and you may have itchy skin (pruritus).

How can I get Hepatitis C?

Hepatitis C is passed from person to person through blood-to-blood contact. This can happen through:



- sharing equipment (needles, syringes, spoons, straws) used to take recreational or performance-enhancing drugs, such as anabolic steroids, even if you do it only once
- blood transfusion or organ transplant in the UK before 1996
- medical or dental treatment in a country where infection control procedures are poor
- tattoos, piercings, acupuncture or electrolysis where infection control procedures are poor, such as unlicensed venues, the armed forces or in prison
- unprotected sexual contact where blood was present
- sharing personal hygiene products, such as razors and toothbrushes, which may have small droplets of blood on them
- from mother to her unborn child. This is very rare (less than a 5% chance).

How can I avoid giving Hepatitis C to others?

There is no vaccine for hepatitis C, but you can take precautions to prevent spreading the virus:

- cover any cuts or wounds
- avoid sharing personal items such as toothbrushes, razors, nail clippers, scissors and hair clippers
- use a condom during sex
- if you inject drugs, never share needles, syringes, water, spoons or filters with others.

It is important to get close contacts, such as a partner, tested for hepatitis C.

How is Hepatitis C diagnosed?

It is diagnosed with a blood test. You need two tests, which can often be done from one blood sample:

- **Antibody test:** If you have ever been exposed to the virus, your body will produce antibodies to fight it. If we find antibodies to HCV, you need a second test



- **PCR (RNA) test:** This checks if the actual virus is present in your blood.

Important: If you take the antibody test too soon after being exposed to HCV, it may not detect the virus, leading to a 'false negative' result. It may take three to six months for the virus to show up on tests so we recommend follow-up testing if you have – or think you may have been – recently exposed to the virus.

Can Hepatitis C be treated?

It is treatable and curable with just a short course of tablets. See page 7 for more information.

How can I get treated?

You can get treatment from a number of different places, such as King's Liver outpatient department at Denmark Hill and at drug and alcohol centres locally. Let us know if it is difficult for you to come to a clinic and we will do our best to make other arrangements for you to be seen.

If you or someone you know has hepatitis C and is not currently receiving treatment, please email our nursing team on kch-tr.HEPCNS@nhs.net. We would be happy to call back and talk about treatment options and any support needed.

Hepatitis C is often called 'the silent killer', so however well you may feel, it is still important to be seen and get treatment.

Hepatitis C home testing kits

If you – or someone you know – are worried that you may have been exposed to the virus and need to be tested, you can order a testing kit online that you can use at home. This service is confidential. The test is easy to do and involves a simple finger prick.



For more information and to order the home testing kit, go to the website or scan the QR code.

Website: <https://hepctest.nhs.uk>



How does Hepatitis C affect my liver?

The virus can cause cells in your liver to become inflamed. If it stays in your body for a long time, this inflammation can lead to scarring of your liver called fibrosis. Over time, severe scarring may develop into cirrhosis, but this can take decades if it happens at all.

The speed at which fibrosis gets worse varies from person to person. It may happen faster if you:

- are male
- are over 40
- are overweight or obese
- have diabetes
- drink alcohol (there is no known safe amount for people with HCV)
- smoke
- have another virus, such as HIV or hepatitis B.

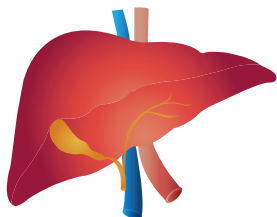
But your liver can continue doing all the jobs it needs to do in the first stages of cirrhosis.

When cirrhosis becomes severe, it is called decompensated cirrhosis. Your liver specialist will explain whether you have any fibrosis, cirrhosis or decompensated cirrhosis and what it means for your health.

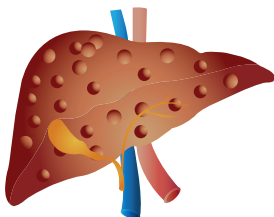


Only about 16% to 20% of people with chronic hepatitis C develop cirrhosis, and if this happens, it usually takes 20 years or more.

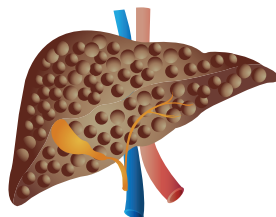
Stages of liver disease



Normal liver



Liver fibrosis



Cirrhosis

How is liver scarring measured?

There are two different ways of seeing if you have any liver scarring:

1. Fibroscan: This is a non-invasive scan, similar to an ultrasound, which measures the stiffness of your liver. Generally, the higher the reading suggests that you have more fibrosis (scarring) or, ultimately, cirrhosis.

2. FIB-4 score: This is a calculation taken from your blood results. The higher the reading, the more scarring there is likely to be on your liver.

Your liver specialist will discuss your Fibroscan or FIB-4 results with you.

If any of your results suggest that your liver is cirrhotic, this will be explained to you by your liver specialist. We recommend you have a liver ultrasound scan every six months to monitor you for any more damage or cancerous changes, because there is a risk of liver cancer with cirrhosis or decompensated cirrhosis.



When you are first seen for hepatitis C you will also have a routine liver ultrasound scan. This is a non-invasive scan which checks what your liver, gallbladder and spleen look like.

How can I look after my liver?

Your lifestyle is important for your general health but also for your liver health. You can help look after your liver by:

- not smoking
- eating healthily. Take a look at the NHS Eatwell Guide on the NHS website, www.nhs.uk
- exercising moderately
- keeping alcohol to a minimum. But if you have cirrhosis we recommend that you do not drink alcohol at all
- if you are known to have a fatty liver, please take a look at our information leaflet, available at www.kch.nhs.uk/document/masld-fatty-liver-disease or by scanning the QR code.



How is Hepatitis C treated?

Since 2015, **new oral tablets** called direct-acting antivirals (DAAs) have been available to treat hepatitis C. These tablets are highly effective, with a **success rate of more than 95% in clearing the virus**.

You take this medication as an oral tablet for 8 or 12 weeks. Most people have few or no side effects.

The recommended medication for you is based on:

- **your liver health** – whether you have liver damage (any fibrosis or cirrhosis)
- **previous treatment history** – if you have had HCV treatment before
- **the type (genotype) of HCV you have** – there are six

genotypes (with subtypes such as 1a or 1b). You will have a blood test to find your genotype. If you cannot have this test because of difficult veins, do not worry, some treatments still work very well against all genotypes and **this will not reduce your chance of clearing the virus.**

When do I start treatment?

This will usually be with a face-to-face consultation with one of our liver specialists. They will explain how to take the medication and what to expect.

At this appointment you are usually given all the tablets you need for your treatment to take at home with you. You will then be phoned to check on your progress.

If needed, the medication can be provided monthly, along with more frequent check-ups.

The Hep C Trust offers peer support for those who want extra guidance during treatment.

If you have decompensated cirrhosis, you may need to be seen for some in person check-ups during your treatment.

It is important to take the medication exactly as you are advised and to complete the full course. This gives you the best chance of clearing the virus.

Drug interactions

Hepatitis C treatments can interact with other medications, supplements or herbal remedies. These interactions can:

- make your HCV treatment work less well
- cause side effects or be potentially harmful.



To keep you safe, we always check for interactions before you start treatment. If you are prescribed any new medication during your treatment, it must also be checked to ensure it is safe to take with your HCV medication.

Completing treatment

At the end of your treatment, you will see a specialist nurse, pharmacist or doctor and have a blood test to check how the treatment is working. This test does not confirm whether you have completely cleared HCV.

To know for sure, you will need another blood test 12 weeks after finishing treatment. This final test checks for a sustained virological response (SVR) – which means the virus is gone and you are cured. Your specialist nurse, pharmacist or doctor will discuss your results with you once they are available.

Please remember that successful treatment does not mean that you cannot catch the virus again. Look back at page two to see how you can catch hepatitis C.

Blood tests after successful treatment

Even after successful treatment, you will still have HCV antibodies in your blood. This is normal and nothing to worry about. It simply shows that you had HCV in the past.

If you are ever tested for HCV again, it is important that the HCV RNA or viral load is also checked, not just antibodies. A positive antibody test does not mean that you still have the virus, only that you were previously infected.



What should I expect after successful treatment for Hepatitis C?

If you do not have cirrhosis, you will be discharged from the liver clinic once we have confirmed that you have cleared the virus.

If you have cirrhosis, you will need ongoing care, because you have a small risk (less than 5% per year) of developing liver cancer (hepatocellular carcinoma). For this reason, you will not be discharged and will need to come for a liver ultrasound and check-up every six months.

These check-ups are important to monitor your liver health and catch any issues early.

What happens if the Hepatitis C treatment is not successful?

Hepatitis C treatment has a **very high success rate (more than 95%)**, but in rare cases, it may not fully clear the virus.

If this happens, do not worry – there are other treatment options available. Your liver specialist will discuss the next steps with you at your follow-up appointments.

Who can I contact with queries and concerns?

Please speak to your doctor, nurse or pharmacist in the specialist liver clinic.

Admin team

Tel: 020 3299 5802

Email: kch-tr.hepatitisadmin@nhs.net

Nursing team

Email: kch-tr.HEPCNS@nhs.net



More information and support

King's College Hospital Website:

www.kch.nhs.uk

The Hepatitis C Trust

Helpline: 020 7089 6221

www.hepctrust.org.uk

British Liver Trust

Talk to a nurse: 0800 652 7330

www.britishlivertrust.org.uk

Relate

www.relate.org.uk

Samaritans

Tel: 116 123

www.samaritans.org

Alcoholics Anonymous

Tel: 0800 917 7650

www.alcoholics-anonymous.org.uk

Narcotics Anonymous

Tel: 0300 999 1212

www.ukna.org

Mind

www.mind.org.uk



MyChart

Our MyChart app and website lets you securely access parts of your health record with us, giving you more control over your care.

To sign up or for help, call us on **020 3299 4618** or email **kings.mychart@nhs.net**. Visit **www.kch.nhs.uk/mychart** to find out more.

PALS

The Patient Advice and Liaison Service (PALS) offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. They can also pass on praise or thanks to our teams. The PALS office is on the ground floor of the Hambleton Wing, near the main entrance on Bessemer Road - staff will be happy to direct you.

PALS at King's College Hospital, Denmark Hill, London SE5 9RS

Tel: **020 3299 4618**

Email: **kings.pals@nhs.net**

If you would like the information in this leaflet in a different language or format, please contact our Interpreting and Accessible Communication Support on 020 3299 4618 or email kings.access@nhs.net

www.kch.nhs.uk