



Viral Hepatitis C in North Carolina, 2020



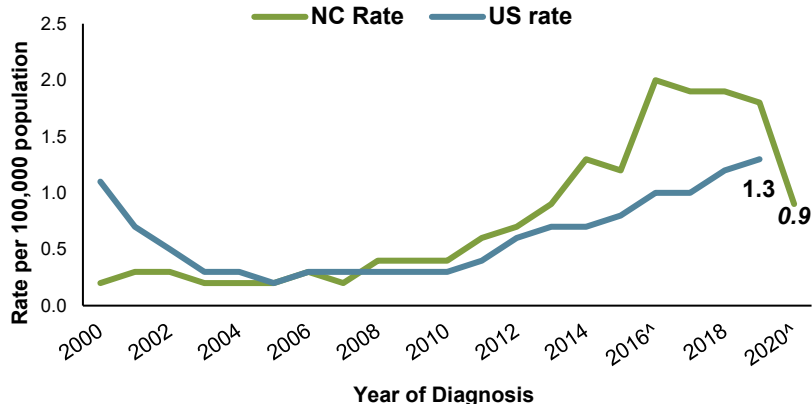
The decline in acute hepatitis C reflects overall decreases in testing during 2020.

Acute Hepatitis C

- There were 100 newly diagnosed acute hepatitis C cases in 2020*, a rate of 0.9 per 100,000 population.
- Between 70-85% of acute infections will progress to a chronic infection.

Chronic Hepatitis C

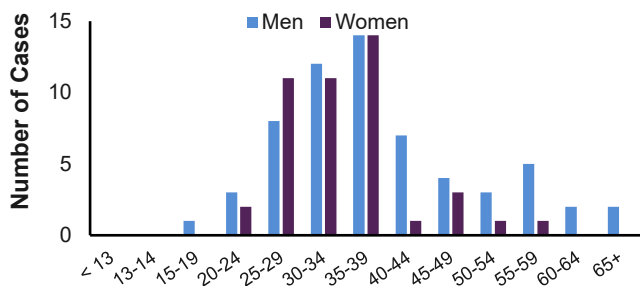
- It is estimated that at least 200,000 people living in North Carolina are infected with chronic hepatitis C.
- As of December 31, 2020*, there were 72,552 reported cases of chronic hepatitis C.
- In 2020*, there were 12,313 newly reported chronic hepatitis C cases.



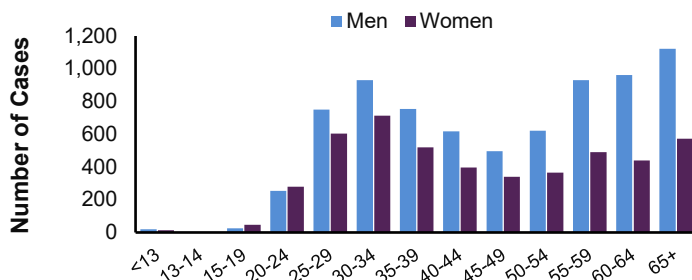
^Case definition for hepatitis C changed in 2016 and then again in 2020.

Acute and chronic HCV infect different age groups.

Acute Hepatitis C



Chronic Hepatitis C



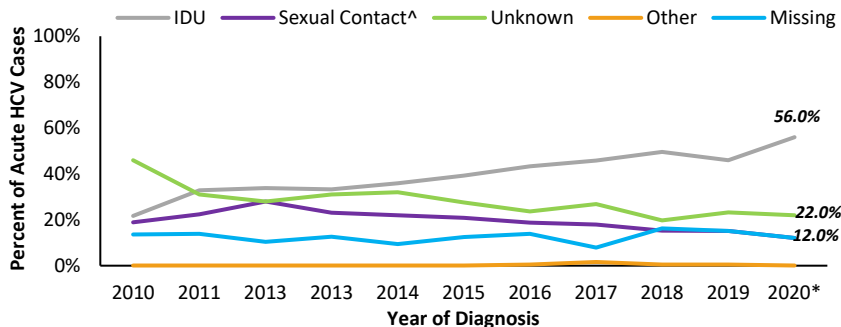
Age at Diagnosis (Year)

- The majority of people acutely infected with hepatitis C are between the ages of 25 and 39 (rate: 3.3 per 100,000). Chronic HCV is more widely distributed across age ranges. The high case numbers among young people for both acute and chronic hepatitis C mean that hepatitis C is currently spreading among younger people.

Injection 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 2020*, IDU was reported by 56% of people diagnosed with acute hepatitis C.
- Exposure is based on self-reported data. People may report more than one risk, and the source of exposure is difficult to determine for many cases. These data likely reflect under-reporting of higher-risk exposures, such as IDU.

Hepatitis C Risk Factors By Year



*Note: 2020 data should be treated with caution due to reduced availability of testing caused by the COVID-19 pandemic. Data is italicized for this reason.

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Hepatitis C Causes and Symptoms

Hepatitis C virus infection 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.

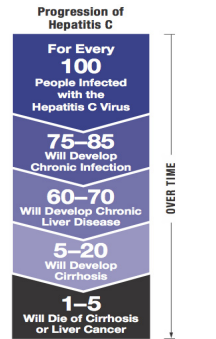


Image from: <https://hepatitisfoundation.org/HEPATITIS/Hepatitis-C.html>

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.
- Hepatitis C transmission 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 whether currently or in the past
- 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 who have a history of incarceration
- People born between the years of 1945-1965
- Children born to HCV-positive mothers

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) (https://epi.dph.ncdhhs.gov/cd/hepatitis/CHAMP-Brochure_FINAL-WEB.pdf).
- 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 (<https://epi.publichealth.nc.gov/cd/hiv/hmap.html>).
- Risk-based testing for hepatitis C is available through all local health departments at no cost.
- People with hepatitis C infection should NOT be excluded from work, school, child care, play, sports or other settings based on their hepatitis C 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.
- The North Carolina Viral Hepatitis Program (NC Division of Public Health) created a regional drug user health resource guide. This guide includes information on low cost/free clinics, housing, food pantry and community resources, hepatitis treatment providers, and syringe access programs. The guide is available online: https://epi.dph.ncdhhs.gov/cd/hepatitis/DrugUserHealthResourceGuide_08102021.pdf.
- The North Carolina Harm Reduction Coalition (<http://www.nchrc.org/>) provides harm reduction materials to syringe access programs and community-based organizations to prevent transmission of hepatitis C.
- Injury and Violence Prevention Branch (NC Division of Public Health) oversees the North Carolina Safer Syringe Initiative. For more information: <https://www.ncdhhs.gov/divisions/public-health/north-carolina-safer-syringe-initiative>.
- Perinatal hepatitis C (birthing person-to-infant transmission) is not reportable, although ALL HCV-positive birthing persons should be referred to the NC DHHS Viral Hepatitis Program to ensure that both mother and the infant are followed and linked to care as needed. Please contact Dianne Brewer @ dianne.brewer@dhhs.nc.gov or #(919) 546-1694.

Data Sources: North Carolina Electronic Disease Surveillance System (NC EDSS) (data as of August 1, 2021), enhanced HIV/AIDS Reporting System (eHARS) (data as of June 28, 2021), Surveillance for Viral Hepatitis, United States, 2000-2019 CDC reports (<https://www.cdc.gov/hepatitis/statistics/index.htm>).