

Hepatitis C in Australia

What is hepatitis C?

Hepatitis C is a blood-borne virus, it attacks the liver and causes inflammation:

- few symptoms at time of infection so often people don't know they have been exposed to the virus.
- 1:4 will clear the virus naturally
- 3:4 will have lifelong infection and symptoms will emerge over a period of years
- may lead to cirrhosis (scarring of the liver), liver failure and liver cancer.

How common is hepatitis C?

9700 infections occur every year.

- 264,000 Australians have been exposed to the virus

How is hepatitis C passed on?

Infected blood has to enter the bloodstream of another person.

- the virus is highly infectious
- blood does not have to be visible for transmission to occur.

Most common ways of transmission in Australia:

- sharing drug injecting equipment
- unsterile tattooing or body piercing
- receipt of blood products prior to 1990.

Occasionally transmission may occur through:

- mother to baby transmission
- sharing of personal items e.g. razors
- inadequate sterilisation of instruments during medical/dental procedures

Hepatitis C is not a sexually transmitted infection, however, people need to consider the potential for blood-to-blood contact during sex as this could present a transmission risk.

Hepatitis C is **not** passed on by casual contact (sharing utensils, kissing etc).

Overseas some countries have much higher rates of hepatitis C linked to unsterile mass vaccination programs and/or unsterile medical procedures.

Who is most at risk?

*People with or at risk of hepatitis C come from **all** sectors of the community but this diversity is often not recognised.*

People should consider being tested if they have:

- injected illicit drugs – even once
- had an unsterile tattoo or body piercing
- come from or had medical treatment in a country with high rates of hepatitis C
- received blood or blood products prior to 1990.

How can hepatitis C be prevented?

*There is no vaccine for hepatitis C, unlike hepatitis A and B. Avoiding exposure to the virus is the **only** way to stop the spread of hepatitis C.*

Education is essential to:

- promote understanding of the need for prevention
- increase knowledge of the means of prevention

Hepatitis C can be prevented by:

- distribution of clean needles and syringes to injecting drug users through the government funded Needle and Syringe Programs (NSPs)
- ensuring tattoos, body art and piercings are only performed in a sterile way
- not sharing toothbrushes and razors
- adequate sterilisation of equipment used in medical and dental procedures
- ensuring blood and blood products are not contaminated

Australians traveling overseas should be aware that some countries do not have the same high standards of infection control practised in Australia.

What impact can hepatitis C have on you?

Most people with chronic hepatitis C do experience a reduction in their quality of life and some are severely affected. All facets of life can be affected – health, relationships, finance, employment etc

Not everyone will have symptoms, however, the most common include:

- debilitating fatigue
- abdominal pain
- loss of appetite
- nausea and vomiting
- fever
- skin rashes
- joint and muscle pains
- feelings of isolation and depression.
- brain fog, irritability and/or mood swings.

Are people with hepatitis C subject to discrimination?

Discrimination has a major impact on people with hepatitis C.

It can result from unfounded fears of infection or from assumptions and judgments relating to the close link between hepatitis C and injecting drug use.

Discrimination can occur in all aspects of life including:

- healthcare settings
- employment
- housing
- insurance
- superannuation
- social networks.

What is chronic hepatitis costing the health care system?

There are significant and increasing costs to the healthcare system for testing, treatment and transplants.

The total cost of hepatitis C in 2004/05 was \$156m. This includes research and screening; prevention; diagnosis and treatment.

This is a much bigger epidemic than HIV/AIDS, why does the public know so little about hepatitis C?

The Grim Reaper adverts were a wake up call to HIV for all Australians but had an unintended negative impact on the gay community.

There is an urgent need for a sensitive hepatitis C public awareness campaign to:

- educate the public
- combat discrimination, and
- encourage testing and treatment if appropriate.

Is there an effective treatment for hepatitis C?

There is an effective medical treatment available with a cure rate of 50-80% depending on the strain of hepatitis C.

- a combination of pegylated interferon (a weekly injection) and
- ribavirin (daily tablets).

Treatment lasts 6-12 months, side-effects of treatment vary from person to person and it does not suit everyone.

In 2005-06 the total annual average of people on hepatitis C treatment in Australia was 2,408 and this rose to 3,845 in 2006-07.

Why don't more people have treatment?

Many factors impact on the treatment decision:

- the chance of being cured
- support to deal with side-effects
- prior experience of discrimination in healthcare settings
- the need to travel to liver clinics and long waiting times to see a specialist.

Treatment may not be a priority for those with complex social or health issues.

What can people with hepatitis C do to help themselves?

Successful self-management has many elements.

Small changes can make a big difference and different strategies work for different people, for example, the impact of hepatitis C may be reduced by:

- eating a balanced diet
- reducing alcohol and tobacco intake
- introducing regular moderate exercise
- avoiding or reducing stress.

Increasing self-knowledge around the virus, symptoms control and treatment options can help people with hepatitis C take control of their health.

What about hepatitis A and B?

Hepatitis A causes a short, acute illness that does not develop into a chronic condition.

Around 90,000 to 160,000 people in Australia have chronic hepatitis B.

The government response to hepatitis B has focused on promoting vaccination of children.

This needs to be broadened to include:

- care and management of those who already have chronic hepatitis B and
- those at risk who have not been vaccinated.

Role of Hepatitis Australia

Hepatitis Australia (formerly Australian Hepatitis Council) is the national organisation representing the interests of all people with hepatitis C through our members, the State and Territory Hepatitis Councils. The role of Hepatitis Australia is to advocate at a national level for people with viral hepatitis. We work with government to formulate strategies that address the epidemic, and with State and Territory Councils to coordinate the community-based response, and build the capacity of the workforce.

Hepatitis C - 2006 Estimates & Projections

Every four years, the National Centre in HIV Epidemiology and Clinical Research at The University of NSW compiles *Estimates and Projections of the Hepatitis C Virus Epidemic in Australia*. The 2006 report reveals:

- The total number of people who have been exposed to hepatitis C in Australia is 264,000.
- It is estimated there are 197,000 people with chronic hepatitis C infection.
- New cases fell from 16,000 in 2001 to 10,000 in 2005.
- Up to 39,000 people may be unaware they have hepatitis C.
- The number accessing treatment is just 1% or 2,000 people.
- 65% of those with hepatitis C are aged 20 to 39 years & 35% of total notifications are in women.
- 10.9% of all people with hepatitis C in Australia were born in countries with higher rates of hepatitis C.
- There are an estimated 22,000 Aboriginal and Torres Strait Islander people with hepatitis C.
- 6.8% of infections are attributed to contaminated blood, unsterile tattooing, unsterile body piercing, sharing of toothbrushes and razors, occupational exposure and mother to baby transmission.

Injecting drugs users:

- 218,000 (80%) of all cases are associated with injecting drug use
- Among people attending needle and syringe programs the uptake of antiviral treatment for hepatitis C is very low, less than 5%.

Prison populations:

- It is estimated that between 9,000 and 14,000 of the total prison population (25,353 persons) have hepatitis C.
- National rates of hepatitis C in prison entrants is 34% for males and 50 to 70 percent for females.

Prevalence and Incidence by State and Territory in 2005

	ACT	NSW	NT	QLD	SA	TAS	VIC	WA	TOTAL
Exposed to hepatitis C	3,400	100,300	1,800	39,300	17,200	3,400	74,200	24,300	264,000
Incidence	130	3,700	70	1,500	630	130	2,700	900	9,700

For more information...

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