

Hepatitis C: The Forgotten Plague

By Michael Littau

What do Steven Tyler of Aerosmith, Pamela Anderson, Dr. Jack Kevorkian, Evel Knievel, and Natalie Cole have in common? If you answered that they've all been diagnosed with Hepatitis C, then you would be correct.

Hepatitis C or hepacivirus (HCV), for which there are treatments, but no cure, affects approximately 300 million people worldwide with 4 million of those in the United States alone.¹

HCV is the number one blood-borne virus in the United States. Rates of transmission are even higher than for HIV.²

Good news exists in the fight against Hepatitis C. Transmission rates reportedly have been dropping since its reported peak in 1992.³

However, that does not mean we should rest on our laurels in the fight against this disease.

[Donald Brode M.D.](#) is a local expert in the treatment of HIV and HCV who treats approximately 600 persons in both his private and public practice that have been diagnosed with HCV and 50 to 70% of those patients are also HIV +. The rates of HIV infected persons that Dr. Brode sees, who also have HCV, numbers approximately 15%. However, Dr. Brode warns that in some practices that co-infection number can be as high as 35%. Moreover, according to Dr. Brode, many co-infected persons are not likely candidates for the available therapies to help clear or control the Hepatitis C virus due to the physical and mental conditions of those patients.⁴

Treatments for the HCV virus include the antiviral class of drugs, inoculation against hepatitis A and B (to ward of any co-hepatitis infections that could complicate treatment), and in some cases, if the person is relatively healthy; no treatments are administered, so one can fight the infection without aid. In extreme cases of infection, a liver transplant may be necessary.⁵

Recent developments in the production of a promising vaccine for HIV do not necessarily bode well for a vaccine ready for clinical trials in the treatment of HCV. According to Dr. Brode there are many different subtypes (genotypes) and

¹ Centers for Disease Control

² Armstrong GL, Wasley AM, Simard EP, McQuillan GM, Kuhnert WL, Alter MJ. The prevalence of hepatitis C virus infection in the United States, 1999 through 2002. *Ann Intern Med* 2006;144:705–14.

³ IBID, CDC

⁴ Email Q&A with Don Brode MD 9/25/09

⁵ Mayo Clinic Online

variations with HCV and it will “likely be a long time” before there are meaningful trials for a vaccine against HCV.⁶

Therefore it’s important for people to take steps to avoid infection. Since HCV is a blood borne (or blood to blood) transmitted virus Dr. Brode advises “do not share needles, razor blades, toothbrushes even” and to always use condoms with vaginal and anal intercourse. As with those who are infected with HIV, persons infected with HCV may not know they are infected nor do they always exhibit symptoms of infection. In fact, Dr. Brode states that persons infected with HCV usually show no visual symptoms at all unless they have advanced liver disease. Some persons infected with HCV may also develop an unusual rash called porphyria cutanea tarda.⁷ Which is a photosensitive (sensitive to sunlight) rash in the form of blisters and erosions seen commonly on exposed areas of the skin. This can be a chronic condition, slow to heal, and can leave scarring.⁸

Although rates of transmission have been trending downward nationally Dr. Brode warns that physicians have seen a small increase upwards in infection with men who have sex with men and he reminds us that there is “still a likely significant number of persons with HCV in the US who do not know it yet.”⁹

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⁶ IBID, Interview with Don Brode MD

⁷ IBID

⁸ Journal of Hepatology October 2001 (from pubmed.gov)

⁹ IBID, Interview with Don Brode MD