

Assessment Guide For Hepatitis C Risk Factors

Information for Health Care Providers

This guide discusses the risk factors for transmission of hepatitis C virus infection and provides guidance to health care providers who counsel people with hepatitis C and those at risk for acquiring the disease.

Hepatitis C is spread mainly by parenteral exposure to an infected source, although transmission can occur in settings where blood-to-blood contact is not apparent. Hepatitis C is not spread through intact skin or mucous membranes, aerosol or droplet spread, or the fecal-oral route. Many of the routes of hepatitis C transmission may also transmit other blood-borne diseases such as HIV and hepatitis B.

Transmission via Injection Drug Use

Injection drug users and injection steroid users who share injection equipment are at risk for acquiring hepatitis C. This equipment includes the syringes, needles, cookers, spoons, filters and all other injection equipment. This is the most prevalent mode of transmission today.

Transmission via Crack-Smoking

Crack smokers use glass pipes to inhale the smoke. The pipes heat up and cause a superficial burn on the lip. Sharing crack pipes carries a risk of transmitting hepatitis C. Crack smokers do not need to have single-use equipment, but equipment should not be shared between users.

Transmission by Cocaine Use

Cocaine snorting causes irritation and ulceration of the nasal mucosa with bleeding. This can contaminate straws used for snorting cocaine. Sharing a contaminated straw increases the risk of hepatitis C transmission.

Transmission via Blood Transfusion Prior to 1992

In 1990, a first generation ELISA test was introduced for screening blood donations. Between 1990 and 1992, there were some cases of hepatitis C transmitted through the blood supply as this screening test was not sufficiently sensitive to catch all infected units. By 1992, a second generation HCV antibody test was introduced which

significantly reduced the risk of HCV transmission via the blood supply in Canada. Patients who have had a blood transfusion prior to 1992 should be tested for HCV.

Tattoos and Piercings

Tattoos and piercings carry obvious risks of transmission of parenteral diseases such as hepatitis B and C. However, tattoo and piercing parlours became regulated in January 1998 in accordance with the Mandatory Health Programs and Services Guidelines and therefore are required to use single-use needles and inks, so that the risk of disease transmission is negligible. Tattoos and piercings acquired in unregulated or un-inspected premises, or with unsterile needles and re-usable ink containers carry a risk of transmitting hepatitis C. Tattooing and piercings acquired in prison carry a particularly high risk of hepatitis C transmission.

Sexual Transmission of Hepatitis C

The risk of sexual transmission is low. This risk is elevated during sexual activity associated with abrasions and blood-to-blood contact. Hepatitis C has a higher prevalence in people who have sexually transmitted infections.

Maternal-Infant Transmission

Maternal-infant transmission of hepatitis C occurs in about three to five per cent of all pregnancies when the mother is infected. The risk of transmission is increased if the mother is HIV-positive or has a very high hepatitis C viral load. Breastfeeding is not contraindicated, except in the presence of cracked and bleeding nipples.

Immigrants to Ontario

Immigrants to Ontario may come from countries with a high prevalence of hepatitis C. 1999 global prevalence statistics can be found at:

www.who.int/docstore/wer/pdf/2000/wer7503.pdf

Want to learn more?

For more information on risk factors, call 1-877-234-4343 (TTY 1-800-387-5559) or visit www.hepOntario.ca