



Raynaud's Phenomenon

Written by: Alan Franciscus, Editor-in-Chief

Forward

In someone infected with hepatitis C, Raynaud's phenomenon is caused by HCV-related cryoglobulinemia. The prevalence of Raynaud's phenomenon in the hepatitis C population is unknown, but it is believed to be an uncommon condition. In people with HCV-related cryoglobulinemia, however, one study found that 30% of people also had Raynaud's phenomenon.

SYMPTOMS

Raynaud's is a painful condition that affects the blood vessels in the fingers, toes, ears, and nose. When Raynaud's phenomenon affects the fingers it is easy to diagnose because the end of the fingers turns white. Raynaud's is diagnosed by lab tests (for autoimmune diseases), and by physical exam.

Raynaud's affects more women than men – about 75% of all cases are diagnosed in women who are between 15 and 40 years old. Between 5 to 10% of the U.S. population have Raynaud's Phenomenon.

There are two types of Raynaud's – primary and secondary. Primary is the milder form of Raynaud's that has no underlying disease or associated medical condition. The secondary form of Raynaud's is less common than the primary one, but it is considered a more severe condition that is caused by another disease or condition.

CAUSES

The exact cause of Raynaud's is unknown, but it is considered an autoimmune disease and has been linked to cryoglobulinemia, hypothyroidism, scleroderma, lupus, Sjögren's syndrome as well as occupational exposure to toxins, environmental factors (exposure to cold temperature) and certain medications, and can be triggered by emotional stress.

—CONTINUED

HCSP FACT SHEET

*A publication of the
Hepatitis C Support Project*

**EXECUTIVE DIRECTOR,
EDITOR-IN-CHIEF,
HCSP PUBLICATIONS**

Alan Franciscus

DESIGN

*Leslie Hoex,
Blue Kangaroo Design*

PRODUCTION

Leslie Hoex

CONTACT INFORMATION

Hepatitis C Support Project
PO Box 15144
Sacramento, CA 95813
alanfranciscus@hcvadvocate.org

The information in this fact sheet is designed to help you understand and manage HCV and is not intended as medical advice. All persons with HCV should consult a medical practitioner for diagnosis and treatment of HCV.

This information is provided by the Hepatitis C Support Project a nonprofit organization for HCV education, support and advocacy

**Reprint permission is
granted and encouraged
with credit to the
Hepatitis C Support Project.**

Raynaud's Phenomenon —CONTINUED FROM PAGE 1

Below are some strategies for managing Raynaud's:

- Take action as soon as possible at the first sign of attack
- Warm hands and feet
- If outside temperature is cold go inside as quickly as possible to warm up. Run warm water over hands and feet or soak them in warm water
- Stop smoking – nicotine causes skin temperature to drop which can contribute to the condition
- Stress reduction—biofeedback, meditation, and deep breathing exercises
- Exercise can improve overall health and reduce stress
- Consult with and regularly visit a medical provider

TREATMENT

Medical treatment of Raynaud's may include calcium-blockers, various topical skin ointments, and vasodilators including high-blood pressure drugs, erectile dysfunction medication sildenafil, the antidepressant fluoxetine, and the hormone prostaglandins.

Another treatment of Raynaud's phenomenon caused by hepatitis C-related cryoglobulinemia is treating the underlying cause-hepatitis C.

Related publications:**Extrahepatic Manifestations Glossary**

<http://hcvadvocate.org/resources/glossaries/extrahep-glossary/>

Type 2 Diabetes

http://hcvadvocate.org/hepatitis/factsheets_pdf/Type2Diabetes.pdf

Patient Assistance Programs

<http://hepatitiscmedications.hcvadvocate.org/patient-assistance-programs/>

For more information

- | | |
|---|--|
| <ul style="list-style-type: none"> • Americans with Disabilities Act
www.ada.gov • Centers for Disease Control and Prevention
www.cdc.gov | <ul style="list-style-type: none"> • Mayo Clinic
www.mayoclinic.com • MedlinePlus
www.nlm.nih.gov/medlineplus |
|---|--|

GET TESTED
GET TREATED
GET CURED

Extrahepatic Manifestations of Hepatitis C