



HCV FACT SHEET

HCV ADVOCATE

• HCV AND WOMEN •

An Overview of Women and HCV

Forward

Hepatitis C (HCV) is an equal opportunity virus. It affects men and women from all ethnic backgrounds. In the United States, there is a higher prevalence of HCV among men. Women living with HCV have issues that differ from men's.

Women are more likely to clear HCV than men are. This means that after they contracted HCV, their bodies successfully fought it off. They will test positive for HCV antibodies, but further tests will show they do not actually have it.

Liver disease tends to progress more slowly in women than in men. Women are less likely to die from HCV than men are. Avoiding alcohol is one of the most important steps you can take in order to help your liver. The amounts of alcohol for healthy women (without HCV) are lower than the amounts for men. Women are more susceptible to alcohol-related health problems. Mix alcohol with hepatitis C and you have a recipe for disaster.

HCV is often a silent disease. Some people report feeling free of symptoms and are often surprised when they learn they have HCV. Sometimes the only sign of HCV is found when a blood test is done. This may occur when one of the liver enzymes, ALT, is abnormally high. This suggests that the liver might be inflamed, so more lab tests are ordered to find out the reason for the inflammation. Sometimes a person can be HCV+ and have normal ALT levels. This means that their medical providers will not have one of the usual clues that would suggest the need for further testing.

Why is this important for women to know? Some experts believe that the cut-off number for abnormal liver tests should actually be lower for women than the

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EXECUTIVE DIRECTOR, EDITOR-IN-CHIEF, HCV PUBLICATIONS

Alan Franciscus

DESIGN

*Leslie Hoex,
Blue Kangaroo Design*

PRODUCTION

Leslie Hoex

CONTACT INFORMATION

HCV Advocate
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.

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numbers most labs use. If you are a woman with any risk factors for HCV or your liver enzymes are on the high side of normal, get tested.

Although some people do not have any symptoms, there are HCV+ women who might not know they have it because their physical complaints are similar to other medical conditions. A classic example is menopause. Some women notice multiple changes at menopause as well as the years before menopause. These can include fatigue, body aches, and difficulty thinking clearly. These are also common HCV symptoms.

It is important to consult a medical provider about health changes. It is easy to confuse HCV symptoms for something else. The reverse is also true. Do not blame everything on HCV. Many medical conditions have similar symptoms to HCV. Some of these are very easy to treat.

Approximately 20 million Americans of has some sort of autoimmune disease; roughly, 3 out of 4 of these are women. Some autoimmune diseases share similar symptoms with HCV. Autoimmunity has been linked to HCV, but the relationship is not well understood. Autoimmunity is a confused immune system in which the body starts attacking its own cells.

This sounds frightening, but not all autoimmune diseases are serious if treated. The most common autoimmune disease causes a low thyroid problem. For most people, this can be treated easily. There are other more serious autoimmune diseases, such as lupus. Talk to your medical provider about this, especially if you have a family history of autoimmune diseases.

Women with HCV want to know if it is okay to take hormones, such as birth control pills or hormone replacement therapy (HRT). From an HCV perspective, the answer is yes. HRT is controversial for other reasons not related to liver disease. Talk to your medical provider about this.

If you take medication for menstrual cramps or other causes of pain, ask your medical provider what the best medications are for pain management. Although acetaminophen is generally safe if taken as directed, it can cause liver damage if the dose is exceeded, or if taken with alcohol. Some pain medications, such as hydrocodone, are combined with acetaminophen. Find out how to use all medications safely, especially if you are undergoing HCV treatment.

HCV Transmission

- **Household Risk** – Although there hasn't been a documented case, theoretically HCV can be passed via personal items. Do not share razors, cuticle scissors, nail clippers, toothbrushes or other items that might be exposed to blood. Feminine hygiene products should be discarded properly.
- **Occupational Risks** – Some predominately female occupations may present more opportunities for blood-to-blood contact. Some of these are nursing and other healthcare professions; those in the janitorial and housecleaning industries; and those in the cosmetic and personal care industry. If you work closely with blood, follow the safety guidelines for your work situation.

Female sex workers, especially those who trade sex for drugs are at an increased risk of HCV. Sex workers who

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use injectable drugs are encouraged to learn how to do so safely. Community Needle Exchange and Harm Reduction programs offer education and services that promote safer drug use.

- **Sexual Risk** – HCV sexual transmission rates are quite low. Women who are in exclusively monogamous relationships, have a near zero risk of transmitting or being infected with HCV.

The risk increases if you or your partner has HIV, other sexually transmitted diseases, or open sores, cuts, or wounds. Anal sex may have a higher risk, particularly if any tissue is torn. Oral sex appears to be without risk for HCV. Current recommendations are that people in stable monogamous relationships do not need to change their sexual practices. The risk may be higher during a woman's menstrual cycle, and many experts advise using protection during these periods. Safer sex is recommended for those engaged in sex with multiple partners. Although there is no guaranteed prevention method, the use of barrier protection is advised.

- **Transfusion Risks** – Prior to 1992, the blood supply in the U.S. was contaminated with HCV. Approximately 250,000 women are infected with HCV because they received blood for caesarean sections prior to 1992. The blood supply in the U.S. has been very safe since 1992.

HCV and Supplements Commonly Used by Women

Herbs and dietary supplements may seem appealing, but some can cause serious harm. If you have HCV, be sure to tell your health care provider all

the dietary supplements you take. People who are undergoing HCV treatment or have cirrhosis should never use herbs except under strict medical advice. Make wise, informed choices before taking any dietary supplements. Before you take an herb or supplement, find out if it is compatible with other drugs or supplements you are taking. Verify that the supplement is not contraindicated for any other condition you may have. Apply the same caution and commonsense approach to supplements that you would to any drug.

The best way to take vitamins and minerals is by eating a nutritional diet. Never take high doses of vitamins, minerals, or other supplements unless you do so under medical care, and it has been cleared by the specialist who is following your liver disease.

- **Multivitamins and minerals** – Choose a no or low iron version unless your medical provider wants you to have the additional iron. Pre-menopausal women may need iron supplementation.
- **Vitamin A** – Best from food or beta-carotene supplements; limit retinol intake to 700mcg or 2,333 IU daily.
- **Calcium** – It will not damage your liver if you take the recommended daily allowance of calcium. Talk to your medical provider about the correct dose for your needs.
- **Black Cohosh** – This herb is sometimes used for premenstrual complaints, painful periods, and management of menopause symptoms. In

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Australia, there were three reports of severe hepatitis linked to black cohosh use, two of which resulted in liver failure requiring transplant surgery. Black cohosh should not be taken by pregnant or lactating women. Black cohosh may interact with a number of other drugs, herbs and dietary supplements.

- **Vitamin D** – This vitamin is often used, especially for those with liver disease. Vitamin D appears to be safe for the liver. Health care providers make dosage recommendations based on lab results.

Pregnancy, Childbirth, and Breastfeeding

The only recommendations against pregnancy for HCV-positive women pertain to those taking while on HCV medications. There are no recommendations regarding vaginal versus Cesarean section delivery. There may be a higher mother-to-infant transmission risk for those with both HCV and HIV.

Pregnancy does not change HCV progression except if cirrhosis is present. Lab tests measuring liver function (liver enzymes) may fluctuate during pregnancy. The amount of virus in the blood (viral load) may also fluctuate during pregnancy. It is recommended that women needing a viral load test should wait until after the postpartum period.

If pregnancy occurs while taking ribavirin, or six months after treatment has stopped, tell your medical provider. All pregnancies should be reported to the Ribavirin Pregnancy Registry. You or your doctor can do this. This is confidential, free, and important.

Ribavirin: Pregnancy Registry 1-800-593-2214;
<http://www.zydususa.com/registry/>

After the birth, the mother should tell her infant's pediatrician. The Centers for Disease Control and Prevention (CDC) recommends testing for children born to HCV+ mothers. Some babies may be born with the HCV antibody but they may actually lose this by the time they are 18 months old. It is advised to wait for 18 months after the birth before doing this test.

There are no recommendations against breastfeeding for HCV-positive women, unless they are taking ribavirin. Practice good nipple care. If your nipples are cracked or bleeding, stop breastfeeding until you are healed.

HCV Treatment

HCV infection is curable. Current HCV treatments have high success rates, are easier to tolerate, and have shorter treatment lengths. If you are a woman thinking about treatment, learn about the risks and benefits. Above all else, know the warnings about pregnancy and breastfeeding.

Many factors influence when to start HCV treatment. Depending on your situation, treatment typically lasts 8 to 12 weeks. Women with children are constantly trying to balance work and family issues. HCV treatment may upset this balance. There may not be a perfect time to start, but it is important that you have good support and a life that is somewhat settled and flexible.

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What to Consider When Making Treatment Decisions

- The drugs to treat hepatitis C are not approved to treat pregnant or breast-feed women. Tell you health care provider as soon as you learn about your pregnancy.
- Some of the new HCV medications may interact with hormones, including contraceptives. Ask your doctor if you need to adjust or change your hormones. Sometimes it is simply a matter of delaying the time between when you take your HCV medication and your hormones.

Conclusion

You are not alone. There are millions of women in the world living with hepatitis C. By gathering information, you have already begun the process of learning how to live with HCV. Add in good medical care, support and a healthy lifestyle, and you have a formula that may keep you healthy for years to come.

Related publications:

- **Women and Hepatitis C: An HCV Guide**
www.hcvadvocate.org/hepatitis/factsheets_pdf/Women_Guide.pdf
- **Being a Positive Mother**
www.hcvadvocate.org/hepatitis/factsheets_pdf/Wm_Mother.pdf
- **A Guide to Understanding Hepatitis C:**
www.hcvadvocate.org/hepatitis/factsheets_pdf/HCV_Guide.pdf

For more information

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| <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"> • National Cancer Institute: www.cancer.gov/cancertopics/factsheet/Sites-Types/WM • Waldenstrom Macroglobulinemia at the Mayo Clinic www.mayoclinic.com |
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*This fact sheet was originally written by Lucinda Porter, RN.
It has been reviewed and updated by Alan Franciscus.*

