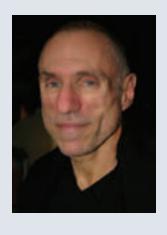
Do You Have HIV/HCV Co-infection?





Hello, my name is Jules Levin,

and I am co-infected with human immunodeficiency virus (HIV) and hepatitis C virus (HCV). There are several ways to contract these viruses. I became infected with both because I was an intravenous (IV) drug user who shared needles with others.

When I was diagnosed with HIV infection, I asked my doctor to test me for HCV

because I knew that HIV and HCV are often contracted in the same way. When I found out I was positive for HCV infection, I asked about my treatment options right away. I was happy to learn that there was a successful treatment for HCV in the form of drug therapy. I started my first treatment about 6 years ago, and today I am HCV free.

My journey has not been easy. I have my HCV viral load checked periodically, and it remains undetectable. I also undergo magnetic resonance imaging (MRI) every 6 months to check for liver cancer and will need to continue doing so for a few years. You see, despite achieving a sustained viral response (SVR), a person who has cirrhosis remains at risk of liver cancer.

Immediately after I finished drug therapy, my HCV-related symptoms started to lessen: my fatigue started to go away, my energy increased, and my reasoning skills improved. In the 2 to 3 years since I have achieved an SVR, my physical and mental energy have continued to improve. These benefits of successful therapy are the rewards of achieving an SVR. Without drug therapy, I would probably be very sick by this point or, perhaps, even dead from liver disease. Instead, I am alive, and I feel better than I have in many years.

The main point is, if you have HCV infection, realize that there are good treatments that have the potential for success. This brochure is intended to start your education regarding HCV: what it is, what the risks are, how

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HCV is spread (transmitted), and, if you are HCV positive, what you can do to live a healthy life.

I already know about HIV. What is hepatitis C?

Hepatitis C is an infectious disease of the liver caused by hepatitis C virus (HCV). HCV is spread by contact with HCV-infected human blood and blood products. HCV infection can lead to serious health issues, especially if left untreated. In fact, HCV infection is the number 1 cause of liver transplants in the United States.

How serious is hepatitis C?

Because HCV damages the liver, it can be very serious. Everything you eat and drink, medications you may take, and chemicals produced by other organs in your body are all filtered through your liver. Your liver also converts fats, proteins, and cholesterol into substances your body needs. The liver performs other crucial functions to maintain good health. For people infected with HCV alone, severe complications are not always seen. On average, about 20% of people infected with HCV alone develop serious health complications. These health complications can take 20 to 30 years to develop.

What is HIV/HCV co-infection?

Co-infection is a term used to refer to having both HIV and HCV. If you are co-infected with HIV and HCV, remember that you are not alone. About 4 million people have HCV infection in the United States, and approximately 1 million Americans are infected with HIV. As many as 33% of people with HIV are co-infected with HCV. It is also estimated that up to 90% of people with HIV who use IV drugs also have HCV. Many people are infected with HCV during their first year of IV drug use. If you have used IV drugs, you may have been infected with HCV for a long time, possibly longer than with HIV. HCV/HIV co-infection is a more serious health concern than HCV infection alone because HCV can progress 2 to 5 times more quickly in people co-infected with HIV than in those infected with HCV alone.

Get tested!

Because people infected with HIV are at risk of having HCV, everyone with HIV should be tested for HCV. Your healthcare provider can perform a simple blood test along with your usual bloodwork. Just be sure to ask your healthcare provider to test you for HCV. Some people infected with HIV who have a suppressed immune system, meaning that they have low CD4 counts (for example, below 100), may test negative on an HCV-antibody test. Therefore, if you suspect you are in a high-risk group for HCV (for example, if you've used IV drugs or have had sex with someone with HCV), you should ask your doctor to check your HCV-RNA (HCV viral load). HCV-RNA test results are usually positive if you have HCV infection.

How is HCV transmitted?

HCV infection is common in people with HIV infection because both can be spread by IV drug use and both HIV and HCV share some routes of transmission. Risk factors for HCV infection include:

- Blood transfusions received before 1992
- Accidental needlesticks, as can occur when working in the healthcare industry
- Blood-to-blood contact
- IV drug use (even once)
- Unprotected sex or risky sexual behavior that breaks mucosa, which includes anal sex. If a sex partner has a sexually transmitted disease, the risk of sexual transmission of HCV increases.
 Having multiple sex partners increases your risk if unsafe sex practices are used.

Other risk factors for HCV include:

- Tattooing and body piercing when performed with contaminated needles or ink
- Body piercing using improperly sterilized equipment
- Snorting cocaine or other drugs (due to blood on a shared straw or bill)
- Sharing a razor, toothbrush, or any item that could carry infected blood
- Hemodialysis (treatment with a kidney machine)

HCV is transmitted by blood-to-blood contact with an HCV-infected person, but blood may NOT be visible because the amount may be microscopic. HCV is very contagious; even a small amount of blood can contain a large amount of HCV, which can be transmitted from one person to another.

How can I prevent spreading HCV?

If you are infected:

- Do not donate blood, tissue, or sperm
- Do not practice unsafe sex
- Do not share needles or personal items, such as razors, toothbrushes, nail files, and clippers, or anything that can hold blood
- Cover cuts and open sores
- Talk to your doctor (primary care physician), a specialist, or both about getting your partner and immediate family members tested

Breast-feeding: Although HCV has been found in the breast milk of HCV-positive women, it is uncertain whether HCV can be transmitted by breast-feeding. Consult your doctor before breast-feeding if you have HCV.

Important: Studies have shown that the risk of HCV transmission from a woman infected with HCV to her newborn is 5%. However, when an infected woman has both HIV and HCV, the risk of HCV transmission greatly increases.

HCV is **NOT** spread by:

Hugging

• Sharing eating utensils or food

· Shaking hands

- · Swimming in a pool
- Sneezing or coughing

How do HIV and HCV affect one another?

HIV affects your immune system, including the body's ability to fight HCV. HIV can also speed the rate of liver damage from HCV, putting people infected with both viruses at a much higher risk of cirrhosis, liver cancer, and liver failure than those infected with HCV alone. The rate of HCV disease progression varies. For people with HIV/HCV co-infection, untreated liver disease can progress in fewer than 10 years. In fact, HCV-associated liver complications are a leading cause of hospitalization and death among people with HIV infection. Because your liver is crucial for processing medicine for HIV infection, protecting your liver from (further) damage is especially important.

What if I don't feel sick?

Most people do not experience symptoms of HCV infection until the disease is well advanced. Some people with HCV infection experience fatigue (tiredness) and muscle and joint aches in the early stages. Signs of more advanced disease include bloating, pain, and fever. If you have HIV/HCV co-infection, even if you do not feel sick, see a doctor or healthcare provider who specializes in hepatitis to discuss care and treatment options.

What are my care and treatment options for HCV?

If you have HCV or HIV/HCV co-infection, it is important that you undergo certain tests to evaluate your condition or the stage of HCV disease. Ask your doctor or healthcare provider to review these tests with you. These tests may include HCV-RNA, which determines viral load; an ultrasound or MRI; and a liver biopsy. It can be important to know your stage of liver disease when making certain treatment decisions, such as when to begin therapy. It is also important to discuss with your healthcare

provider your options for treatment and when to begin therapy. The standard of care for people with HCV infection who have never been treated is combination therapy with pegylated interferon and ribavirin. New drugs are being studied for the treatment of HCV infection.

Vaccines

Currently, there is no vaccine to prevent infection with HCV. There are, however, vaccines to help prevent hepatitis A and hepatitis B. Ask your healthcare provider if it is appropriate for you to receive these vaccines.

What else can I do to protect my health?

- Do not drink alcohol. There is no safe limit of alcohol for people co-infected with HIV and HCV. Alcohol weakens the immune system and can further damage the liver. Excessive alcohol also can reduce your capacity to respond to interferon therapy.
- Avoid illegal drug use and unsafe sex. If you are using illegal drugs, get counseling.
- Maintain a healthy diet.
- Practice stress management.
- Properly manage other health concerns you may have, such as diabetes
 or high cholesterol. Abnormal blood sugar levels and elevated
 cholesterol and triglyceride levels are bad for your liver. Ask your
 doctor or healthcare provider for an evaluation.
- Talk to your doctor, a hepatitis specialist, or both about getting vaccinated against hepatitis A and hepatitis B.
- Tell your doctor, a hepatitis specialist, or both about all medicines you take, even over-the-counter and herbal medicines.
- Learn as much as you can about HCV and get extra support.

Resources for Information on HIV, HCV, and Co-infection

Callen-Lorde Community Health Center

www.callen-lorde.org 212-271-7200

AIDS Project Los Angeles

www.apla.org 213-201-1600

Latino Commission on AIDS

www.latinoaids.org 212-675-3288

HivandHepatitis.com

National AIDS Treatment Advocacy Project

www.natap.org 212-219-0106 or 1-888-26-NATAP

Hep C Advocacy

www.hepcadvocacy.org

Anonymous HIV Testing

Provided by the New York City Department of Health www.nyc.gov/html/doh/html/std/std2.shtml 212-690-1760

Hispanic AIDS Forum (HAF)

www.hafnyc.org 212-563-4500

People of Color in Crisis

www.pocc.org 718-230-0770

www.hepctherapy.net



