

Screening for Hepatitis C Virus Infection

The US Preventive Services Task Force (USPSTF) has recently published recommendations on screening for hepatitis C virus infection in adults.

What Is Hepatitis C Virus?

Hepatitis C virus (HCV) is a virus that infects and harms the liver. It is mostly transmitted by blood. Sexual transmission can also occur, but the risk of this is very low. In the United States, the most important risk factor for HCV infection is past or current injection drug use.

Most people do not have symptoms when they are first infected with HCV. If symptoms do occur, they are generally mild and can include yellowing of the eyes and skin (**jaundice**), abdominal pain, and nausea. Initial infection is called **acute HCV**. Although some people recover fully from acute HCV, most are not able to clear the virus from their body and as a result develop **chronic HCV**. In people with chronic HCV, the virus stays in the liver permanently and can cause nonspecific symptoms such as fatigue, weight loss, and general malaise or no symptoms at all. Over the course of years to decades, chronic HCV can lead to liver cirrhosis or failure (resulting in the need for liver transplantation), liver cancer, and death.

Chronic HCV can be effectively treated with oral antiviral medications. In most people who are treated, the virus can be fully eliminated from the body, and these people are considered cured. There is currently no vaccine for HCV.

What Tests Are Used to Screen for HCV Infection?

Screening for HCV is done by a blood test for the presence of an antibody to HCV. If the result of this test is positive, the diagnosis is confirmed by checking the level of the virus itself in the blood.

What Is the Patient Population Under Consideration for Screening for HCV Infection?

This USPSTF recommendation applies to adults aged 18 to 79 years (including pregnant persons) who do not have any signs or symptoms of HCV infection and who do not have known liver disease.

What Are the Potential Benefits and Harms of Screening for HCV Infection?

The potential benefit of screening for HCV is earlier treatment with antiviral medications, which are highly effective at achieving **sustained virologic response**, meaning the virus cannot be detected in the blood after treatment, which essentially indicates cure. There is evidence that achieving sustained virologic

response can prevent long-term complications of chronic HCV such as cirrhosis, liver failure, liver cancer, and death. Potential harms of screening for HCV have not been well studied but are thought to be small, especially because newer treatment regimens have fewer side effects than older ones. Studies on HCV screening and health outcomes in adolescents and pregnant women are limited.

How Strong Is the Recommendation to Screen for HCV Infection?

Given the current evidence, the USPSTF concludes with moderate certainty that screening for HCV infection in adults has substantial net benefit. Most adults need to be screened only once. However, those who have continued risk of infection (such as active injection drug use) should be screened periodically. The USPSTF also suggests that clinicians consider screening people who are at high risk of infection (past or current injection drug use) and younger than 18 years or older than 79 years.

FOR MORE INFORMATION

US Preventive Services Task Force
www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/hepatitis-c-screening

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Screening for Hepatitis C Virus (HCV) Infection

Chronic HCV is a common infection in the United States that can lead to liver failure, liver transplantation, and death. Antiviral treatment for HCV is highly effective in curing it.



Population

Adults aged 18 to 79 years (including pregnant persons) who do not have any signs or symptoms of HCV infection and who do not have known liver disease



USPSTF recommendation

The USPSTF recommends screening for HCV infection in adults aged 18 to 79 years.

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Conflict of Interest Disclosures: None reported.

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