

Hepatitis C

Hepatitis C Virus (HCV) is the most common bloodborne infection in the United States and the leading reason for liver transplantation. Hepatitis C infects individuals of all ages, ethnic groups, and socioeconomic classes in urban and rural areas of Maine. An estimated 20,000 Maine people have been infected with HCV. Because the infections are often asymptomatic and progress slowly, many people are unaware of their disease status and are missing opportunities for therapeutic or preventive care.

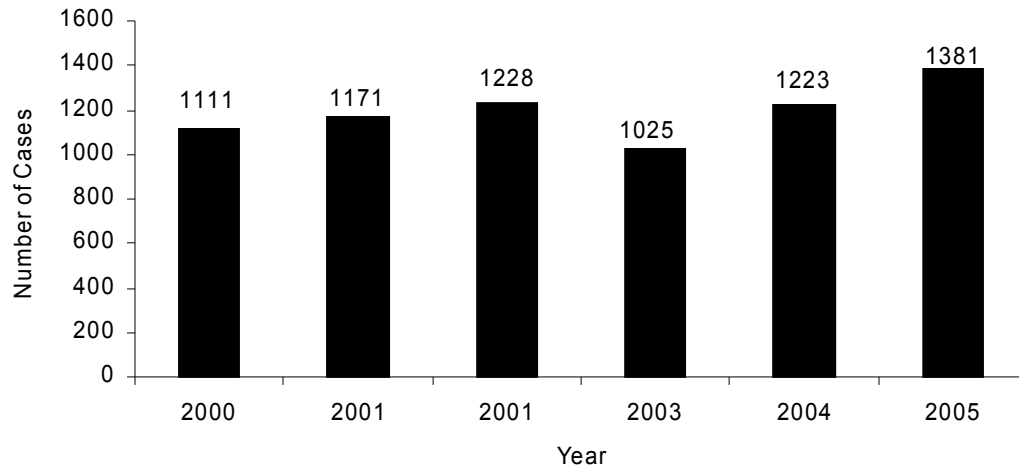
Two confirmed cases of acute hepatitis C virus (HCV) infection were reported in Maine in 2006. Both were females in their 20's. One was an injecting drug user; the other was the partner of an injecting drug user. Due to the lack of a specific test for acute hepatitis C infection, and the lack of symptoms, acute infections frequently go unrecognized.

Since official case reporting was initiated in 1997, the Maine CDC has documented increases in the numbers of individuals diagnosed with hepatitis C. These reports represent Maine people who tested positive for one or more hepatitis C virus diagnostic markers. Data on chronic HCV reports for 2006 are unavailable at this time. In 2005, the Maine CDC received 1,381 reports of persons newly identified with markers for hepatitis C infection positivity, the vast majority of whom were chronically infected. Although the 1,381 reports made in 2005 represent an increase in reports over the 1,223 received in 2004, the annual total is just slightly higher than the numbers of reports received over the previous five years. Due to the number of hepatitis C reports, it is not possible for the Maine CDC to follow up each individual report.

The age distribution for hepatitis C reports made in 2005 demonstrated that the majority of reports received were for persons aged 20-59, with 20% of reports made for persons aged 20-29 and 55% of reports made for persons aged 40-59. Of the 1,381 reported individuals in 2005, 470 (34%) were females and 911 (66%) were males. This represents a slight increase in the percentage of men reported as compared to 61% in 2004 and is comparable with national statistics.

To help identify cases of hepatitis C infection in Maine, medical providers are encouraged to consider each patient's risk for HCV infection to determine the need for testing. Patients for whom testing is indicated include: persons with past or present injection drug use; recipients of transfusions or organ transplants before July 1992; recipients of clotting factor concentrates produced before 1987; persons on chronic hemodialysis; persons with persistently abnormal aminotransferase levels; healthcare, emergency medical, and public safety workers after needle sticks, sharps or mucosal exposures to HCV-positive blood; and children born to HCV-positive women. Children should not be tested for anti-HCV before 18 months of age as anti-HCV from the mother might last until this age. If a diagnosis is desired prior to 18 months of age, testing for HCV RNA can be performed at 1-2 months of age. HCV RNA testing should be repeated at a subsequent visit regardless of the initial HCV RNA test result. Persons who test positive for HCV should be screened for susceptibility to hepatitis A and B virus infection and immunized appropriately.

Chronic Hepatitis C by Year, Maine, 2000-2005



*2006 Hepatitis C data is not available at this time