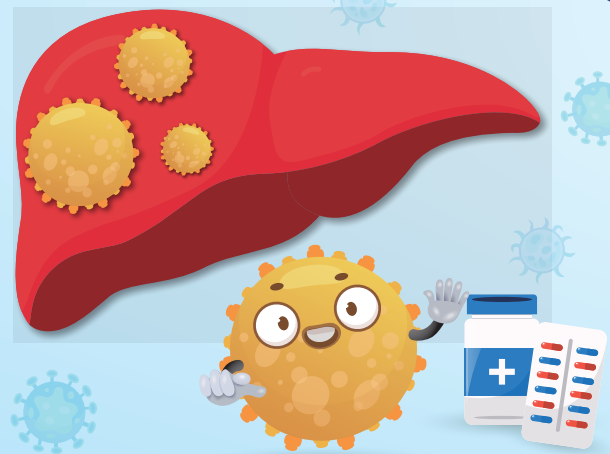


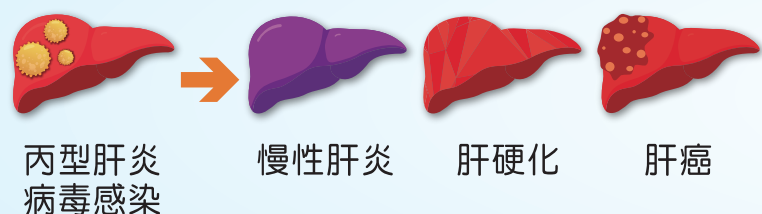
# 丙型肝炎 你要知

What you need to know about Hepatitis C



## 甚麼是丙型肝炎？

- 丙型肝炎是由丙型肝炎病毒感染所引起的肝臟疾病
- 約七成的丙型肝炎病毒感染會發展為慢性肝炎，並可引致肝硬化及肝癌
- 大多數新感染丙型肝炎的患者都沒有明顯症狀，部分急性患者或會出現與其他肝炎相類似的症狀，如發燒、疲倦、食慾不振、噁心、嘔吐、上腹部不適、茶色小便及黃疸（皮膚和眼白發黃）
- 感染丙型肝炎病毒後可持續數十年都沒有症狀，直至肝臟已被嚴重損害後才出現徵狀



## 丙型肝炎是怎樣傳播？

### 接觸感染者的血液或體液

- 共用針咀、針筒或任何其他可能含有血液的器具注射毒品
- 重用未被徹底消毒的醫療器械
- 輸入未經篩查的血液及血液製品
- 在醫護環境中，因工作接觸到帶丙型肝炎病毒的血液或體液

### 性接觸

- 若性伴侶雙方都有皮膚或黏膜破損，在沒有使用安全套的情況下進行性行為會有機會傳播丙型肝炎病毒，尤其是進行可導致血液接觸的性行為
- 男男性接觸者、愛滋病病毒感染者及性病感染者，經性接觸而感染丙型肝炎的風險會較大

### 母嬰傳播

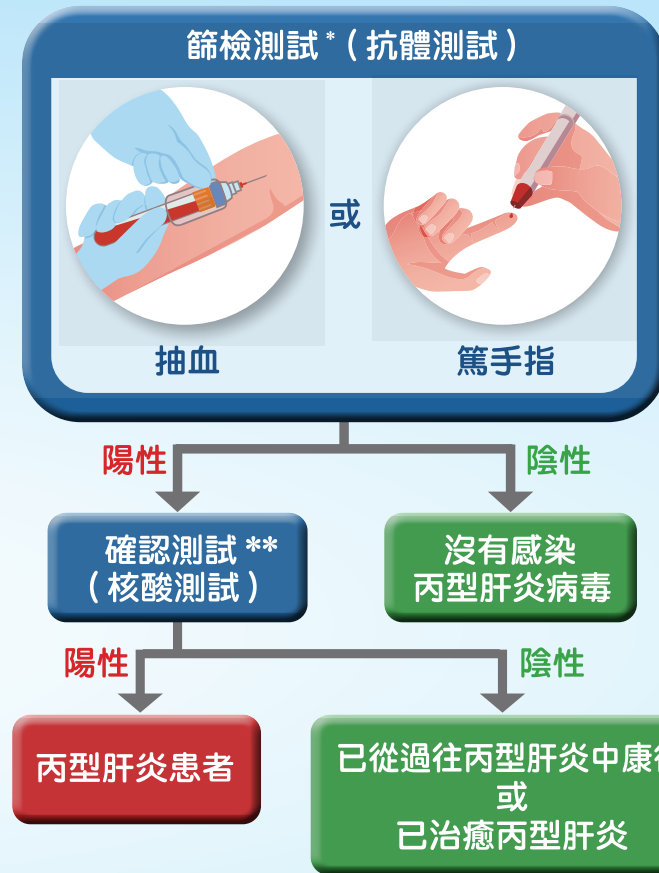
- 母嬰傳播風險估計為4 - 8%
- 現時沒有證據顯示丙型肝炎病毒會經母乳傳播給嬰兒；不過，若乳頭破損及流血，應停止餵哺母乳，直至乳頭傷口癒合

丙型肝炎病毒不會經一般社交接觸（如共用食具、共膳、擁抱、握手及接吻等）而傳播

## 較高感染風險的人士應進行丙型肝炎測試



## 診斷丙型肝炎必須透過血液測試



\* 篩檢測試：檢測丙型肝炎病毒抗體（Anti-HCV）以判斷曾否感染丙型肝炎病毒  
\*\* 確認測試：檢測丙型肝炎病毒核酸（HCV RNA）以判斷現時是否帶有丙型肝炎病毒

- 丙型肝炎病毒抗體測試呈陽性反應的人士，應進一步測試以確認丙型肝炎感染狀況
- 丙型肝炎病毒抗體測試及核酸測試均呈陽性反應的人士，即確診患有丙型肝炎，應接受治療

## 服用直接抗病毒藥物可治療丙型肝炎

- 療效顯著，可治癒九成半以上的丙肝病毒感染，即可「斷尾」
- 口服藥物（毋須注射）
- 療程一般只需八至十二個星期
- 副作用少



成功把病毒清除後，能大大減低病人發展成肝硬化、肝癌及因肝臟疾病致死的風險。若治療前肝功能已經惡化，出現肝硬化或相關併發症，仍需進行定期檢查

丙型肝炎患者服用藥物康復後，並不會有具保護性的免疫力，故應停止進行高風險行為，以預防再次感染丙型肝炎病毒

## 如何預防感染丙型肝炎病毒？

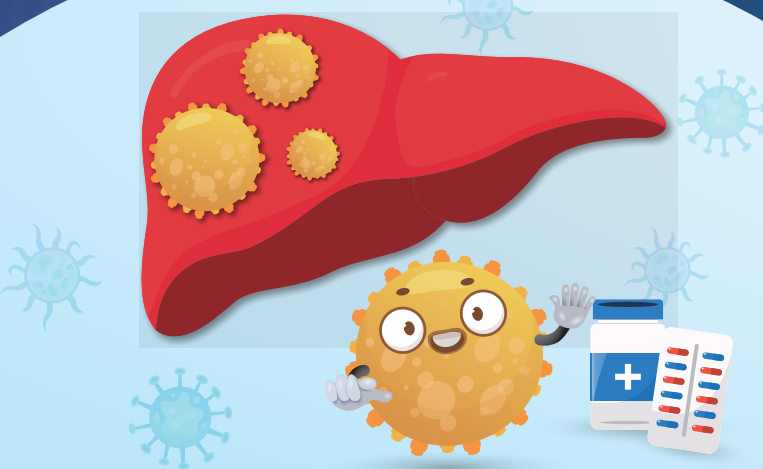
- 注射毒品人士應停止注射毒品，接受美沙酮治療，切勿與他人共用針筒針咀或任何其他可能含有血液的物品
- 切勿與別人共用剃刀、指甲鉗、牙刷等有機會受血液污染的用具
- 採取安全性行為和持續正確使用安全套
- 醫護人員在任何時候都應依循標準防護措施，包括適當安全地處理及棄置針具及利器
- 目前尚未有可預防丙型肝炎病毒的疫苗





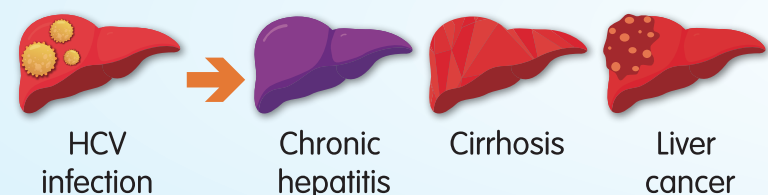
# 丙型肝炎 你要知

## What you need to know about Hepatitis C



### What is hepatitis C?

- Hepatitis C is a liver disease caused by hepatitis C virus ( HCV ) infection.
- Around 70% of people infected with HCV will develop chronic hepatitis, which may lead to cirrhosis and liver cancer.
- Newly acquired HCV infection is mostly asymptomatic. Some people with acute HCV infection may exhibit symptoms indistinguishable from hepatitis of other causes, such as fever, fatigue, loss of appetite, nausea, vomiting, upper abdominal discomfort, tea-coloured urine and jaundice ( yellowing of skin and the whites of eyes ).
- Hepatitis C can remain asymptomatic until decades after infection, when signs and symptoms develop secondary to serious liver damage.



### How is HCV transmitted?

#### Contact with blood or body fluids of an infected person

- Sharing needles, syringes or other equipment for injecting drugs
- Reusing inadequately sterilised medical equipment
- Transfusion of unscreened blood and blood products
- Occupational exposure to blood or body fluid with HCV in healthcare setting

### Sexual contact

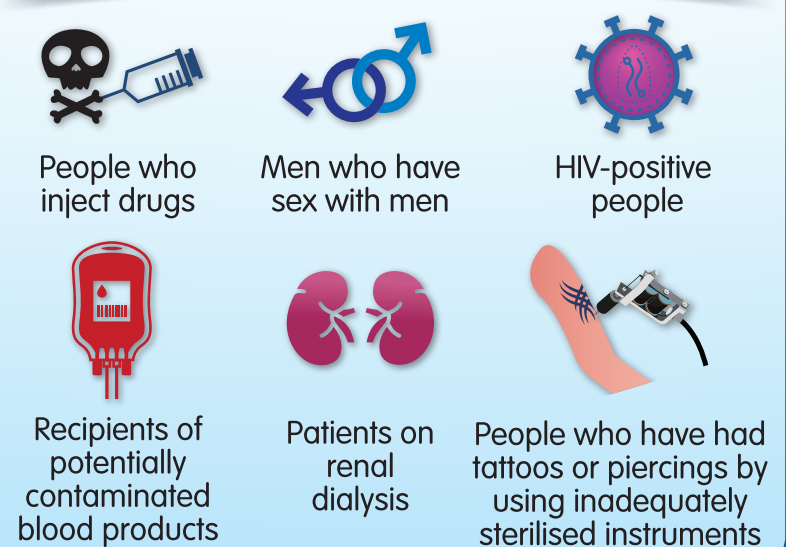
- Sexual transmission of HCV can occur if both partners have skin or mucosal lesions and do not use condoms during sex, especially during sexual practices that lead to exposure to blood.
- The risk of sexual transmission of HCV increases among men who have sex with men, HIV-positive people and those who have sexually transmitted infection.

### Mother-to-child transmission ( MTCT )

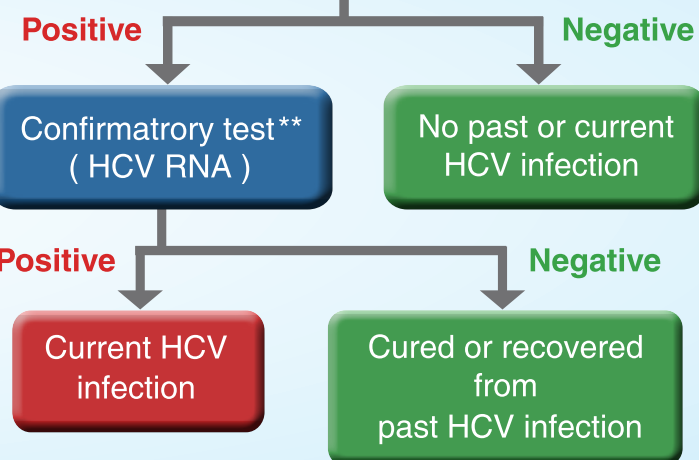
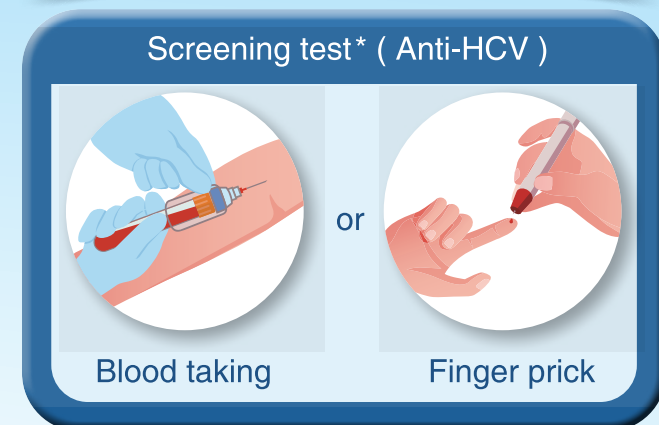
- The estimated risk of MTCT is about 4 - 8%.
- Currently, there is no proof that breastfeeding can transmit HCV. However, if there is nipple crack and bleeding, breastfeeding should be stopped until the cracked nipples are healed.

HCV is **not** transmitted through social contact, such as sharing eating utensils, dining together, hugging, holding hands and kissing.

### Persons at higher risk of HCV infection should get tested



### Blood test is required to diagnose hepatitis C



\* Screening test : Test for antibody against HCV ( Anti-HCV ) to determine whether a person has past exposure to HCV

\*\* Confirmatory test : Test for HCV ribonucleic acid ( HCV RNA ) to determine whether a person currently has HCV

- People tested positive for anti-HCV should have a follow-up test to confirm HCV infection status.
- People tested positive for both anti-HCV and HCV RNA are diagnosed as having **HCV infection**, and should be treated.

### Direct-acting antivirals ( DAA ) can cure hepatitis C

- Highly effective, over 95% of HCV infection can be cured
- Oral administration ( do not require injection )
- Treatment usually takes around 8 - 12 weeks
- Minor side effects

With successful clearance of HCV, the risk of progression to cirrhosis and liver cancer and dying from liver diseases can be significantly reduced. Regular examination is still required if there is deteriorated liver function, cirrhosis or its complication before treatment.

As treatment does not confer protective immunity, recovered hepatitis C patients should **stop high-risk behaviours** to prevent HCV re-infection.

### How to prevent HCV infection?

- People who inject drug should stop injecting drugs and get into methadone treatment programme. Never share syringes, needles or other equipment that is potentially contaminated with blood
- Avoid sharing personal care items ( e.g. razors, nail scissors and toothbrushes ) that are potentially contaminated with blood
- Use condoms correctly and consistently when having sex
- Healthcare workers should always practise standard precautions, including handling and disposing needles and sharps properly and safely
- Currently, there is no vaccine available against hepatitis C

