

HEP C TREATMENT UPDATE SHEET



Why start treatment now?

- Treatment for hep C has really improved (cure rates are now around 95-97% for most people).
- Treatment is the only proven way of clearing your hep C.
- Treatment can improve your liver health by helping to reduce liver inflammation (swelling). It can also help reverse fibrosis and cirrhosis.
- Treatment that clears your hep C should mean that you no longer experience hep C symptoms.
- Treatment is now provided by GPs (in most cases).

Knowing that you are no longer living with hep C may also help you to feel better about yourself, and no longer be stressed about maybe passing on the virus to someone else.

Where can I be treated?

Find your nearest GP who provides hep C treatment by using the Hepatitis NSW online web directory (see next page). Your GP will assess you for treatment. This will include a number of tests to find out your hep C genotype, look at your liver health and measure your viral load. If you are genotype 1-3 and don't have signs of serious liver damage (that's most people), your GP will be able to manage your hep C treatment.

If have hep C genotype 4-6, or signs of serious liver damage, such as cirrhosis, you will be referred for treatment by a specialist. Phone the *Hepatitis Infoline* for more info - 1800 803 990.

Treatment side effects

Most people who take the new treatments will have none, or only mild side effects.

The new treatments might not work well with some other medicines you might be taking but your doctor or specialist will find ways to deal with this.

Pregnancy must be strictly avoided during treatment with Ibavyr (it is a brand name for the drug, ribavirin). Pregnancy must also be avoided with Daklinza. Talk to your doctor about treatment with Sovaldi or Harvoni in pregnancy.

Treatment for hep C genotype 1

If you have genotype 1, you have several treatment options. The first option is a course of Harvoni, and the second option is a course of both Sovaldi and Daklinza. Also, there is VIEKIRA PAK, and VIEKIRA PAK with ribavirin. These options offer around 95-97% chance of cure.

Treatment for hep C genotype 2

If you have genotype 2, you are offered a course of Sovaldi and Ibavyr. This option offers around 95% chance of cure.

Treatment for hep C genotype 3

If you have genotype 3, you have two treatment options. The first option is a course of both Sovaldi and Daklinza, and the second option is a course of both Sovaldi and Ibavyr. These options offer around 95% chance of cure.

Treatment for hep C genotypes 4 and 6

If you have genotype 4 or 6, you are offered Sovaldi pills taken with pegylated interferon injections and ribavirin pills. This option offers a greater than 90% chance of cure.

Preparing for treatment

This involves a blood test to check your hep C genotype and viral load, as well as a Fibroscan examination or blood test to check if you have cirrhosis. Your doctor or specialist will also ask for other info, like what other medicines you are taking, and if you have been on any previous treatment for hep C.

If your tests show signs of liver damage, you will be referred to a specialist or liver clinic for treatment. If you do have liver damage you still have a very good chance of being cured with the new treatments.

If you have cirrhosis you will need long term monitoring for complications (even if treatment works and you are cured of hep C).

Filling of prescriptions

There are different options for getting your prescription (script) filled and getting supplies of the new treatments.

Some scripts are filled by hospital pharmacy but most are filled by regular chemist shops.



Not all chemist shops will prescribe the new medicines. The ones that do will probably order in your medicine and have it ready in the following days. Phone the *Hepatitis Infoline* or see Hepatitis NSW web directory (below) for your closest prescribing chemist shop.

If you don't have any nearby community pharmacies who fill DAA scripts, there are **online pharmacies** who can help. Phone the *Hepatitis Infoline* for more info.

Treatment costs

The medicines are free. But when you take your prescription to a pharmacy you will be charged a "co-payment" fee for each medicine.

This is around \$40 for general patients and around \$7 if you have a Health Care Card.

Treatment monitoring and follow up

If you don't have cirrhosis or other complicating factors, you'll probably only need to see the doctor once (at week 4) for a blood test measuring liver enzymes, kidney function and full blood count. If ribavirin is required in the treatment, then you will probably have blood tests every month of treatment.

Some hospital clinics may use different monitoring protocols based on whether or not people have other illnesses and the complexity and severity of their hepatitis C disease.

All people will require a PCR viral load test 12 weeks after treatment finishes to check if they are cured.

What is a cure?

To be cured, you have to clear the hep C virus from your blood.

To see whether you have cleared the virus, blood tests (PCR viral load tests) are done at 12 weeks after treatment is over (24 weeks for genotypes 4 and 6). A "negative" test result (no virus found) means you are cured of hep C.

If hep C has already caused liver damage, being cured might not mean that you are healthy straight away. If you have cirrhosis, you will still need to see a doctor or specialist for ongoing care. If you have cirrhosis you still have a risk of liver complications (even after being cured of hep C).

Liver clinic waiting lists

If you are already on a liver clinic waiting list, you probably won't have to wait long for treatment. If you go to a liver clinic, now, for the first time, they might ask you to wait a little while for treatment.

The new treatments and doctors

It is important that you visit a doctor and talk about the new treatments – especially if you haven't seen a doctor recently for your hep C or if you already tried treatment but it didn't work.

Your doctor will talk with you about treatment. He or she will talk about checking your genotype and if you have any damage to your liver – by having a blood test called APRI, or by Fibroscan examination.

This is part of the doctor's pre-treatment assessment.

Liver clinics – some finer details

Lots of people have held off starting treatment until these new treatment drugs are available. This means that the hospital liver clinics in NSW probably have a backlog of people wanting to start treatment. Even though the new treatments are much easier to take and manage than the old interferon-based treatments, there are still appointments to be made, consultations held, Fibroscan and other liver health checks performed and admin arrangements to be sorted out before each person with hep C can start treatment.

Because of the backlog and increased demand, liver clinics are likely to organise treatment for those people who have cirrhosis and need treatment more urgently.

If you want to start on treatment now, call the *Hepatitis Infoline* who may be able to recommend doctors in your area who are interested in treating your hep C.

Hepatitis NSW web directory

Our website directory: www.hep.org.au/services-directory/ provides a searchable list of NSW:

- doctors who treat with the new drugs,
- chemists who fill scripts for the new drugs,
- hospital liver clinics,
- and places where Fibroscans are located.

For further information or to chat about the new treatments call the *Hepatitis Infoline* in NSW on 1800 803 990 or visit www.hep.org.au

Last updated 13 July 2016.

For the latest treatment info, phone the *Hepatitis Infoline* or go to www.hep.org.au

While you are talking with one of the Infoline workers, sign up for our monthly email newsletter: *The Champion*.

