

Hepatitis C

A plain-English guide for you and your family

WHAT IS HAPPENING

Your liver is like a chemical factory that cleans your blood, makes proteins, and stores energy. Normally, liver cells (hepatocytes) are tough and resist most viruses. But hepatitis C is different — it slips into those cells through contaminated blood (like sharing needles, unsafe tattoos, or old blood transfusions before 1992) and starts making copies of itself. For most people, there are no symptoms at first — no pain, no yellow skin, nothing to warn you. The virus just sits there, quietly multiplying. Meanwhile, your immune system spots the infected cells and tries to kill them, but it can't clear the virus completely. This slow immune battle goes on for years, even decades. Each time an infected cell is destroyed, the liver tries to heal by laying down scar tissue (fibrosis). Over 20 to 30 years, that scar tissue can pile up and harden into cirrhosis, where the liver becomes stiff and can't do its jobs anymore. Cirrhosis also raises the risk of liver cancer. The good news: direct-acting antiviral pills can now cure hepatitis C in 8 to 12 weeks, stopping the damage before scarring takes over. If you know you've been exposed to someone else's blood — even once, even years ago — ask your doctor for a hepatitis C test.

What you might feel

- No symptoms at all for years (most common)
- Feeling tired all the time
- Belly pain or feeling full on the right side under the ribs
- Yellow skin and eyes (jaundice)
- Dark urine (tea-colored or cola-colored)
- Itchy skin all over
- Swollen belly (ascites)
- Easy bruising and bleeding
- Confusion or sleepiness (hepatic encephalopathy)

Call the doctor right away if...

- Yellow skin or eyes (jaundice) — the liver may be failing
- Swollen belly that keeps growing — fluid is leaking out because scar tissue is blocking blood flow
- Confusion, strange sleepiness, or trouble waking up — ammonia is poisoning the brain
- Vomiting blood or black tarry stools — a vein in the food pipe has burst because of high pressure from liver scarring
- Easy bruising or bleeding that does not stop — the liver cannot make clotting proteins anymore

What the care team will do

- Check for signs of bleeding including vomit that looks like coffee grounds, black tarry stools, bruising, or bleeding gums
- Assess mental status every shift for confusion, sleepiness, or personality changes
- Measure abdominal girth daily at the same spot and weigh the patient every day at the same time
- Screen for alcohol use and connect the patient with addiction counseling or support groups
- Teach the patient to take direct-acting antivirals at the same time every day without missing doses
- Educate the patient never to share razors, toothbrushes, nail clippers, or any item that might have blood on it
- Verify the patient received Hepatitis A and Hepatitis B vaccines or check immunity with blood tests
- Schedule six-month ultrasound surveillance if cirrhosis is present and explain why screening for liver cancer is lifelong

Medicines you may be given — and why

Sofosbuvir-velpatasvir

This pair stops the hepatitis C virus from copying itself inside liver cells. Sofosbuvir blocks the NS5B polymerase (the virus's copy machine that builds new viral RNA), and velpatasvir blocks the NS5A protein (a helper the virus needs to assemble and release new copies). Without these tools, the virus cannot multiply, so your immune system clears out the infection over 8 to 12 weeks.

Glecaprevir-pibrentasvir

This pair also stops hepatitis C from reproducing, using a slightly different attack. Glecaprevir blocks the NS3/4A protease (a pair of scissors the virus uses to cut its long protein into working pieces), and pibrentasvir blocks the NS5A protein (the assembly helper). With both cut off, the virus cannot mature or spread, and the infection clears in 8 to 16 weeks depending on your situation.

Hepatitis A vaccine

This shot trains your immune system to recognize and block the hepatitis A virus before it can infect your liver. It contains pieces of killed virus—completely unable to cause disease—that teach your B cells (immune cells that make antibodies) to build a memory. If the real hepatitis A virus enters your body later, those memory cells wake up fast and flood your blood with antibodies that trap and destroy the virus before it harms you. Because people with hepatitis C already have one liver infection, adding hepatitis A on top can cause sudden, dangerous liver failure—so this vaccine is essential protection.

Hepatitis B vaccine

This shot contains a lab-made piece of the hepatitis B virus's outer coat (the surface antigen), which cannot cause infection but trains your immune system to recognize and attack the real virus. Your B cells learn to make antibodies against that coat, so if hepatitis B virus enters your bloodstream later, the antibodies immediately lock onto it and stop it from infecting liver cells. People with hepatitis C are at higher risk for hepatitis B because both spread through blood and other body fluids, and catching both at once (coinfection) can lead to severe liver damage, so this vaccine is strongly recommended.

Where this information comes from

- AASLD/IDSA HCV Guidance 2024
- CDC Hepatitis C Guidelines
- WHO Hepatitis C Fact Sheet
- U.S. Preventive Services Task Force (USPSTF) HCV Screening 2020

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