

Study examines incident hepatitis C infection in HIV-infected men

February 1 2011

Hepatitis C is a leading cause of illness and death for individuals infected with both HIV and hepatitis C. Recent reports from around the world demonstrate that hepatitis C is emerging as a sexually transmitted infection among HIV-infected men who do not inject drugs. However, many HIV-infected men do not receive continued screening for hepatitis C throughout their HIV care.

Hepatitis C symptoms often do not manifest themselves until the later stages of the illness, so people are not as likely to know that they have become infected and hence need further testing and treatment.

Researchers examined the role of later acquisition of hepatitis C in [HIV](#) patients in a new study published in *Clinical Infectious Diseases*, which is currently available online.

In the study, 1,800 HIV-infected men had an initial negative hepatitis C blood test result, with at least one subsequent test. At the time of their initial negative hepatitis C results, 94 percent were receiving antiretroviral therapy for HIV and 6 percent reported current or prior injection drug use.

Ultimately, 36 patients were subsequently diagnosed with hepatitis C. Of those, 25 percent reported an injection drug use history, although 75 percent reported no current or previous injection drug use.

"Screening HIV-infected patients for hepatitis C only once upon entry into HIV care is not sufficient," according to study author Lynn E.

Taylor, MD, of Brown University in Providence, R. I. "The standard of care needs to change. HIV-infected persons should have access to ongoing screening for hepatitis C. Doctors and patients may not be aware of or freely discuss all risk behaviors that may lead to [hepatitis C](#) infection. These behaviors are often stigmatized. Patients may not feel comfortable discussing these risk factors nor may they be aware of all the ways in which [hepatitis C](#) may be transmitted via blood."

More information:

<http://cid.oxfordjournals.org/content/early/2011/01/29/cid.ciq201.full>

Provided by Infectious Diseases Society of America

Citation: Study examines incident hepatitis C infection in HIV-infected men (2011, February 1) retrieved 26 April 2024 from

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