

Hepatitis C deaths up, baby boomers most at risk

February 20 2012, By LAURAN NEERGAARD , AP Medical Writer

Silent epidemic

With new treatments for hepatitis C now on the U.S. market, the government is working to get more people tested.

For every 100 infected...



75 to 85 will develop chronic infection



60 to 70 will develop chronic liver disease



5 to 20 will develop cirrhosis



1 to 5 will die of cirrhosis or liver cancer



SOURCE: Centers for Disease AP
Control and Prevention

Graphic shows the expected outcomes per one hundred people infected with Hepatitis C

(AP) -- Deaths from liver-destroying hepatitis C are on the rise, and new data shows baby boomers especially should take heed - they are most at

risk.

Federal health officials are considering whether anyone born between 1945 and 1965 should get a one-time blood test to check if their livers harbor this ticking time bomb. The reason: Two-thirds of people with hepatitis C are in this age group, most unaware that a virus that takes a few decades to do its damage has festered since their younger days.

The issue has taken new urgency since two drugs hit the market last summer that promise to cure many more people than ever was possible. And research published Monday says testing millions of the middle-aged to find those who need the pricey treatment would be worth the cost, saving thousands of lives.

"One of every 33 [baby boomers](#) are living with [hepatitis C infection](#)," says Dr. John Ward, hepatitis chief at the [Centers for Disease Control and Prevention](#). "Most people will be surprised, because it's a silent epidemic."

Don't think you need to worry? Yes, sharing a needle while injecting [illegal drugs](#) is the biggest risk factor for becoming infected with this blood-borne virus. But before 1992, when widespread testing of the [blood supply](#) began, hepatitis C commonly was spread through blood transfusions. Plus, a one-time experiment with drugs way back in high school or college could have been enough.

"Asking someone about a risk that happened 20 to 30 years ago is a lot to ask," says Ward. Hence the quest for a new strategy.

About 3.2 million Americans are estimated to have [chronic hepatitis C](#), but at least half of them may not know it. The virus, which affects 170 million people worldwide, can gradually scar the liver and lead to cirrhosis or [liver cancer](#). It is a leading cause of [liver transplants](#).

A CDC study published Monday analyzed a decade of death records and found an increase in [death rates](#) from hepatitis C. In fact, in 2007 there were 15,000 deaths related to hepatitis C, higher than previous estimates - and surpassing the nearly 13,000 deaths caused by the better-known AIDS virus.

Perhaps more surprising, three-fourths of the [hepatitis](#) deaths occurred in the middle-aged, people 45 to 64, researchers reported in *Annals of Internal Medicine*.

"Mortality will continue to grow for the next 10 to 15 years at least unless we do something different" to find and treat the silent sufferers, Ward says.

CDC's current guidelines recommend testing people known to be at high risk, and until last summer there wasn't much enthusiasm even for that step: the reasons are the year-long, two-drug treatment promised to cure only 40 percent of people; treatment was so grueling that many patients refused to try it and treatment could cost up to \$30,000.

Two new drugs - Vertex Pharmaceuticals' telaprevir and Merck & Co.'s boceprevir - are starting to change that pessimism. Research suggests adding one of them to standard therapy can boost cure rates as high as 75 percent. While still full of side effects, they can allow some people to finish treatment in just six months. They add to the price, however, another \$1,000 to \$4,000 a week. Drugs that promise to work even better have begun testing.

Those advances are fueling CDC deliberations of whether to change testing guidelines to recommend that anyone born between 1945 and 1965 get a one-time screening. A second CDC-funded study published Monday analyzed models of that option, and concluded it had the potential to save 82,000 lives.

A third study published Monday from Stanford University looked more closely at the price tag, and concluded the new triple-therapy would be cost-effective for people with advanced disease. It's still cheaper than a transplant costing well over \$100,000. But not everyone with [hepatitis C](#) will go on to suffer serious [liver](#) damage. For those with mild disease, that analysis concluded some gene testing to predict who might really need the costlier triple therapy rather than the older drugs would be a good next step.

It's not clear how quickly the CDC will settle the boomer-screening question. But doctors at New York's Montefiore Medical Center have started raising the issue with boomers. And Montefiore internist Dr. Gary Rogg says a number of patients have sought testing after seeing hepatitis-awareness ads from the drugs' manufacturers.

"Now it's considered a curable disease, that makes all the difference," says Rogg, who was surprised at some longtime patients' test results. Even a nurse he knows learned she had it, and the only risk she could recall was a blood transfusion during surgery when she was 10 years old.

More information:

Online: Centers for Disease Control and Prevention:
<http://www.cdc.gov/>

Montefiore Medical Center: <http://bit.ly/u6scH0>

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