

Hepatitis C increasing among pregnant women

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Electron micrographs of hepatitis C virus purified from cell culture. Scale bar is 50 nanometers. Credit: Center for the Study of Hepatitis C, The Rockefeller University.

Hepatitis C infections among pregnant women nearly doubled from 2009-2014, likely a consequence of the country's increasing opioid epidemic that is disproportionately affecting rural areas of states including Tennessee and West Virginia.

Injection drug use is the main risk factor for the hepatitis C virus, now the country's most common blood-borne [infection](#) with an estimated 3.5 million people living with chronic infection.

"We have seen a dramatic increase in opioid use in pregnancy and in the number of infants having drug withdrawal," said lead author Stephen Patrick, M.D., assistant professor of Pediatrics and Health Policy at Vanderbilt University Medical Center.

"Taken together, this suggests that efforts targeted at preventing and expanding treatment for opioid use disorder may help mitigate some of the increases we see," Patrick said.

Patrick co-authored a study with the Tennessee Department of Health (TDH) that was released today in the Center for Disease Control and Prevention's weekly epidemiological digest *Morbidity and Mortality Weekly Report (MMWR)*.

Hepatitis C infection present at the time of delivery increased 89 percent, from 1.8 to 3.4 per 1,000 [live births](#) from 2009-2014, equaling 35 infants a day exposed to the virus.

Authors reported notable increases in rural counties in Tennessee and in rural states like West Virginia, which had the highest infection rate in 2014 (22.6 per 1,000 live births).

"We found substantial state-to-state variation in hepatitis C infection rates," Patrick said. "West Virginia had the highest prevalence of infection among [pregnant women](#)—1 in 50 newborns were exposed to the virus."

In Tennessee, the odds of a hepatitis C infection at birth were approximately threefold higher for [women](#) residing in rural counties,

4.5-fold higher for women who smoked cigarettes during pregnancy, and nearly seventeenfold higher for women with concurrent hepatitis B virus infection.

Tennessee had 10.1 hepatitis C infections per 1,000 live births in 2014.

"We found that rural and Appalachian counties were particularly impacted by the virus," Patrick said. "In some counties in Tennessee, nearly 8 percent of pregnant women were documented as being infected with hepatitis C at the time of delivery."

Senior author and TDH Medical Director for HIV, STD & Viral Hepatitis Carolyn Wester, M.D, said the increase highlights the importance of ensuring that women of childbearing age have access to hepatitis C testing and treatment.

Patrick agreed, noting that women who know they have the virus before pregnancy can be treated to hopefully clear the virus prior to becoming pregnant.

He also said that it is increasingly important that infants exposed to hepatitis C are monitored to see if they get the virus.

"We need to build systems of care to ensure that all infants exposed to the [virus](#) are adequately followed," Patrick said.

TDH State Epidemiologist Tim Jones, M.D., said the study is an important reminder of the threat of this growing epidemic to high-risk populations throughout the U.S.

"While this study focuses on pregnant women and a high-risk area in Tennessee, it is also important to remember that hundreds of thousands of people throughout the U.S. have hepatitis C, and a large percentage of

them do not know it," Jones said.

"Anyone born between 1945-1965, or who has ever used IV drugs, or is otherwise worried about [hepatitis](#) infection, is encouraged to discuss with their clinicians whether testing may be appropriate for them," he said.

Provided by Vanderbilt University Medical Center

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