

HEPATITIS CASE STUDY

Tiffany is a 32 yo female who presents to your office requesting screening for Hepatitis. She read an article in People magazine about Naomi Judd who was diagnosed with Hepatitis at a routine office visit and this saved her life.

What risk factors would you ask about to assess her risk of Hepatitis?

She denies all risk factors that you bring up. She does complain of chronic fatigue and of feeling achey all over at least for the past 3-4 months. She does not work outside the home and cares for her 2 children – ages 8 and 6. Stable partner x 4 years and denies any substance abuse. No medications except OCPs and NKDA. PMH depression with a suicide attempt 5 years ago.

What are the USPSTF screening recs re: Hepatitis C?

Her PE is unremarkable apart from obesity (BMI 30). You look back and see that she did have AST/ALT elevated but less than 2x ULN about 2 years ago at an ER visit for abdominal pain and nausea.

It becomes clear to you that she will not feel satisfied with this visit unless you screen her for Hep C. **Which test(s) will you order?**

As you might have expected, her Hepatitis C screening test comes back positive. Her AST and ALT are elevated at 93 and 102. You bring her back in follow-up to discuss results.

What are your counseling / education goals for this visit?

What other tests or interventions do you plan to order?

Tiffany states she has a cousin who was diagnosed with Hep C but her body “fought it off” and now she is free of disease. She wants to know what the likelihood of this is in her case. **What would you tell her?**

She is currently only sexually active with her partner. He has recently been tested as well and is Hep C negative. She is worried about what precautions she should take to prevent him from getting infected. **What would you tell her?**

Tiffany’s grandfather was an alcoholic and died of complications of cirrhosis. She wants to know if she is “going to end up like that...” and if so, how soon?

What is her chance of developing cirrhosis in the next 15 years and what factors might make her more or less likely to progress?



Tiffany returns in follow-up ready to “fight this thing!” She has completely eliminated alcohol but is having a hard time losing weight – actually is eating more as a way to cope with her anxiety about her illness. Her results are:

Hep C viral load 931,000 IU/ml --- Genotype 1a
Normal CBC and LFTs, HIV negative
Ultrasound with fatty infiltration

She wants to know more about her results and next steps – what will you tell her based on her current status?

Tiffany returns to see you after a visit with the hepatologist that she found confusing. She was offered a liver biopsy to better stage her liver disease but thinks they also said she might not be a good candidate for treatment. She would like your opinion.

What is the treatment for Hepatitis C?

What are the contraindications to and the side effects of treatment?

Tiffany returns to the hepatologist and has a biopsy that shows only mild fibrosis; therefore they decided against treatment at this time.

As you see her in follow-up, what extra-hepatic manifestations of Hepatitis C should you be on the watch for?