If you’ve been diagnosed with chronic (long-lasting) hepatitis C (Hep C), you may be surprised, but you’re not alone.

Even though Hep C affects about 3.5 million people in the U.S., it’s a disease that’s not talked about much. It’s been almost forgotten.

This brochure will help you understand your Hep C diagnosis and how to work with your healthcare provider moving forward.
WHAT TO EXPECT FOLLOWING YOUR DIAGNOSIS

While Hep C is a serious liver disease, it can be cured. In fact, there’s never been a better time to seek treatment for Hep C. Recent scientific advances have led to shorter treatment options with average cure rates of around 95%.

Following your diagnosis, your healthcare provider may refer you to a Hep C Specialist for further testing. These tests will guide your Specialist in making decisions about the length and type of Hep C treatment that’s right for you.

Cure means the virus is not detected in the blood when measured 3 months after treatment is completed.

IMPORTANT TESTS TO DIAGNOSE YOUR HEP C

THE ANTIBODY TEST
You’ve probably taken a blood test called an antibody test. It would have shown if you’ve ever been exposed to the Hep C virus.

THE VIRAL LOAD TEST
You may also be given a test that measures the amount of Hep C virus in your blood—your viral load. This test confirms that you have chronic Hep C.

THE GENOTYPE TEST
There is another test that reveals your genotype (the type of Hep C you have). Most people in the U.S. have genotype 1. Other genotypes include 2, 3, 4, 5, and 6. Treatments are available for every genotype and all of them can be cured.

Need help finding a Hep C Specialist?
Visit HEPCHOPE.COM
or call 844-9-HEPCHOPE
to talk with a Hep C Educator.
MEASURING LIVER DAMAGE

As Hep C progresses, it creates scarring in the liver, called fibrosis. While fibrosis may not cause any symptoms, it may cause the liver to stop working as well as it once did. Over time, liver fibrosis can lead to severe scarring, also known as cirrhosis.

**Damage to the liver is measured in stages by a “fibrosis score” (F),** which tells you how much scar tissue is present. There are many different tests that can determine your fibrosis score. The results of your fibrosis tests will help your healthcare provider make treatment decisions.

Fibrosis tests include:
- Blood tests
- Ultrasound
- Liver biopsy

**There are several stages of liver damage.**
The “F” in the chart stands for fibrosis, or scarring. The number after the “F” represents the amount of liver damage. F0 means no damage. F4 means severe liver damage.

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**THE STAGES OF LIVER DISEASE**

- **STAGE 0 (F0)**
  The liver is healthy.

- **STAGE 1 (F1)**
  Liver damage has begun with some light scarring.

- **STAGE 2 (F2)**
  Fibrosis begins to occur. Scar tissue starts to form.

- **STAGE 3 (F3)**
  More damage. Blood flow in the liver has been affected.

- **STAGE 4 (F4)**
  Cirrhosis has occurred. There is so much scar tissue that the liver is not able to work as it should.
The Hep C virus can be unpredictable. Plus, it affects everyone differently. That’s why it is so important to keep in close contact with your healthcare provider and get regular checkups.

**Some factors that affect how Hep C progresses include:**

- Your age when you were infected
- Whether you are male or female
- The health of your immune system
- Your use of alcohol
- Your race or ethnicity

You may be able to help slow down the progression of liver damage. Healthy lifestyle changes may include:

- **STOP DRINKING ALCOHOL**
  Alcohol can speed up liver damage.

- **LOSE WEIGHT**
  If you are overweight, losing weight may decrease the risk of liver damage.

- **QUIT SMOKING**
  Smoking increases the risk of liver disease.

- **EAT A WELL-BALANCED DIET**
  This can make it easier for the liver to do its job.

- **STAY ACTIVE**
  Walk or do some physical activity every day to maintain your overall health. (Talk to your healthcare provider before starting any new physical activity.)
Hep C can only be spread if the blood of an infected person gets into another person’s bloodstream.

**TAKE THESE SIMPLE STEPS TO AVOID SPREADING HEP C TO YOUR FAMILY AND FRIENDS**

- **Don’t share personal items** like toothbrushes, razors, nail clippers, or other manicure tools. Sometimes a small amount of infected blood that you cannot see exists on personal items.

- **Cover cuts** until they heal completely.

- **Look out for blood** when you get a cut, and don’t expose others to your blood. The Hep C virus can survive on a surface for up to 3 weeks. So make sure you carefully clean and disinfect any surface with blood on it.

Hep C is not spread by casual contact. **ALL OF THESE ACTIVITIES ARE SAFE**

- Hugging and kissing
- Shaking hands or holding hands
- Sneezing or coughing
- Sharing eating utensils, food, or drink
- Breastfeeding
KEEP IN TOUCH WITH YOUR HEALTHCARE PROVIDER

Your healthcare provider can help you stay healthy as you consider treatment. Talk with them about your test results, any changes in your health, and next steps. Remember—the sooner Hep C is treated, the better the chances are for being cured.

You might ask your healthcare provider:

• Can my Hep C be cured?
• Should I start treatment for my Hep C?
• What can I do to get ready for treatment?
• Do I need any additional tests?
• How long can treatment take?

Cure means the virus is not detected in the blood when measured 3 months after treatment is completed.

CONNECT WITH OTHERS

This is also a good time to begin building a network of people to support you on your path toward a cure. Family members, friends, and other people living with Hep C are all good choices. Your Hep C Specialist, local hospitals, and health agencies can put you in contact with some of those people in your area.

Visit HEPCHOPE.COM for helpful resources.
HEP C RESOURCES

There is more to know about Hep C, and a lot of information is available online.

Visit HEPCOHPE.COM to learn more about Hep C—and how it may be time to see it in a new light. Hep C Hope offers information and resources that could help you move on from Hep C, including a Hep C Specialist appointment guide. Have questions? Call a Hep C Educator at 844-9-HEPCOHPE.

You also might check out sites like these*:

- hcvadvocate.org
- hepatitis.va.gov
- help4hep.org
- cdc.gov/hepatitis/hcv/patienteduhecv.htm

* These resources are independent third-party organizations and are unaffiliated with Gilead.
CHRONIC HEP C INFECTION
In chronic Hep C, the Hep C virus remains in the body after the acute infection. Chronic Hep C can lead to serious liver damage.

CIRRHOsis
Severe scarring of the liver. Cirrhosis can cause your liver to stop working as well as it should.

CURE
Cure is a medical term. You are considered cured when a lab test done 3 months after you’ve completed treatment does not find any Hep C virus in your blood.

FIBROSIS
Scarring in the liver. As Hep C progresses, scar tissue can replace healthy liver tissue. The liver may then stop working as well as it should.

GENOTYPE
The Hep C virus has at least 6 different types. They are called “genotypes.” Genotype 1 is the most common in the U.S.

HEP C ANTIBODY TEST
A blood test that looks for antibodies related to the Hep C virus. If you have ever been infected with Hep C, you will have antibodies.

HEPATITIS
A disease characterized by inflammation of the liver.

VIRAL LOAD
The amount of the Hep C virus in your blood. Your healthcare provider may test your blood before, during, and after treatment to find out your viral load.