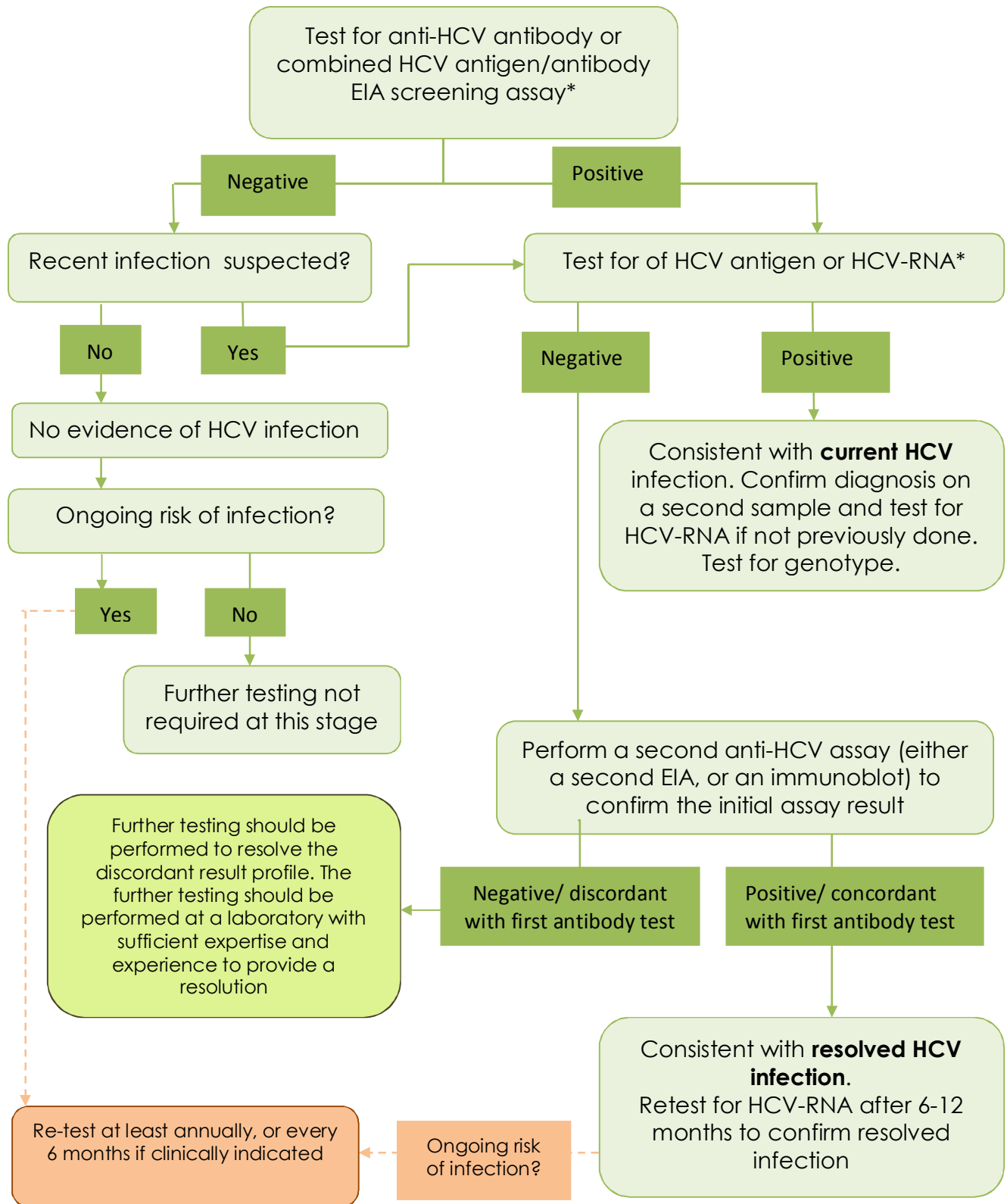


Testing algorithm for hepatitis C infection



*In certain patient groups, initial testing should routinely incorporate HCV-antigen or HCV-RNA testing. Those are: immunocompromised individuals; individuals previously treated for HCV infection; and those at risk of recent infection in whom an antibody response might not yet have developed (HCV-RNA testing should be performed six weeks post-exposure)

Who should I screen for hepatitis C?

- ✓ Those who have ever injected drugs
- ✓ Those who have used unprescribed or illicit drugs by a route other than injecting, if there is a possibility of transmission of infection by the route of administration
- ✓ Prisoners or former prisoners
- ✓ Homeless people who have a history of engaging in risk behaviours associated with HCV transmission, or who have had a potential HCV risk exposure
- ✓ Migrants from a country with an intermediate or high prevalence of HCV (anti-HCV \geq 2%*)
- ✓ People who are HIV positive
- ✓ Infants of HCV-RNA positive women
- ✓ Men who have sex with men
- ✓ People on renal dialysis or who have had a kidney transplant
- ✓ Recipients of blood or blood components in Ireland prior to October 1991 who have not yet been tested
- ✓ Recipients of anti-D immunoglobulin in Ireland between 1st May 1977 and the end of July 1979, and 1st March 1991 to 18th February 1994 who have not yet been tested
- ✓ Recipients of plasma derived clotting factor concentrates in Ireland prior to 1992 who have not yet been tested

**Strong
recommendation**

OFFER SCREENING

- ✓ Those with a tattoo, particularly those who received tattoos a number of decades ago, in non-professional settings, prisons, countries with a high prevalence of HCV, or in circumstances where infection control was poor
- ✓ Household contacts of a person who is HCV positive in circumstances where household transmission is more likely to have occurred
- ✓ Recipients of solid organ transplants in Ireland prior to the introduction of routine screening
- ✓ Recipients of blood components and blood products overseas in any country where a quality assured blood donor screening programme may not have been in place
- ✓ People who have received medical or dental treatment in countries where HCV is common (anti-HCV prevalence \geq 2%*) and infection control may be poor
- ✓ Sexual partners of known HCV cases:
 - ✓ If the case or contact is also HIV positive
 - ✓ If the HCV-infected case is an injecting drug user
- ✓ Sexual contacts of persons who injects drugs, but where HCV status is unknown or where there is evidence of resolved infection
- ✓ Commercial sex workers

**Weak
recommendation**

**CONSIDER
SCREENING**

What specimen type should I use?

- Serum and plasma are the preferred specimen types
- Dried blood spot testing can be considered for screening for HCV in special circumstances, such as mass screening initiatives e.g. in prisons.