

# Triple co-infection - hepatitis C, hepatitis B and HIV

## **Triple Co-infection: Hepatitis C, Hepatitis B and HIV**

All blood borne viruses (BBVs) share common pathways of transmission. Being at risk of one BBV often means being at risk of all of them. Triple coinfection with hepatitis C and hepatitis B and HIV is possible and those people affected need to understand how to manage their conditions in order to maximise their health and wellbeing.

## **Testing for hepatitis C, hepatitis B and HIV**

All people with HIV should be screened for hepatitis C at diagnosis and then on an annual basis (if still at risk or engaged in any high risk activities). Those with HIV who have an unexplained increase in liver function test results should also be tested for hepatitis B.

As hepatitis B, HIV and occasionally hepatitis C can be transmitted sexually, adequate counselling, and advice about transmission and prevention, including the use of condoms and safer sex is advisable.

Higher-risk sexual activities associated with blood-to-blood contact during sex, should also be avoided.

*For further information, refer to the Hepatitis Victoria website at [www.hepvic.org.au](http://www.hepvic.org.au)*

## **Treatment of HIV, hepatitis B and hepatitis C coinfection**

### **HIV and hepatitis B**

With new medications available for hepatitis B, therapeutic options for HIV and hepatitis B co-infected people have improved considerably. Suppression of hepatitis B reproduction in a co-infected person appears to be crucial in preventing the hepatitis B virus from developing resistance to treatment.

### **HIV and hepatitis C**

The introduction of direct acting antiviral (DAA) medicines for hepatitis C treatment, ensures that there are high rates of cure for people with hepatitis C where HIV co-infection exists. In most instances the medicine is all oral and taken for a period of between 12 to 24 weeks. Side effects are minimal and cure rates are not affected by the presence of a co-infection. Care needs to be taken that medicines do not interact and so specialised care from a doctor and specialist is required. Co-infection has greater potential to cause damage to the liver and so regular monitoring of liver function is important. Also, avoiding any damage or stress to the liver is vital.

When initiating HIV treatment, it is recommended that hepatitis B and hepatitis C are closely monitored as flares in hepatitis viral activity, called 'immune reconstitution hepatitis' may occur.

People may experience these flares in hepatitis B viral activity despite being on treatment for hepatitis B.

Coinfection with any of these viruses means that managing health and wellbeing, learning to 'love your liver' and undertaking treatments when needed, are all important aspects of successfully managing the conditions.

To find out more about treatment and management of coinfection, please call the Hepatitis Infoline on **1800 703 003**

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