

Medical Writers' Circle

June • 2004

a series of articles
written by medical
professionals about
the management
and treatment of
hepatitis C

The Importance of Eliminating Alcohol Use if Chronically Infected with HCV

Much has been researched and written about the negative effects of heavy alcohol use on the progression of HCV infection. Even among those who drink alcohol in moderation, the disease may develop more rapidly compared to its development in non-drinkers. In addition, patients who drink alcohol while undergoing treatment for HCV infection are less likely to clear the virus. Whether or not HCV infected patients are candidates for, or are undergoing this treatment, stopping alcohol use represents a major opportunity to prevent a decline in their health and quality of life. Unfortunately, many health providers miss important opportunities to counsel HCV infected patients about the dangers and harmful effects of alcohol use. In fact, many don't ask about their patients' alcohol use at all, and some patients may therefore be unaware of these dangers. This is especially unfortunate

because significantly reducing alcohol use may be the single most important lifestyle change patients with HCV infection can make in order to maintain their health as much as possible. Eliminating alcohol use may reverse some of the harmful effects of alcohol in patients with chronic liver disease, and cutting down or eliminating alcohol use may decrease viral load and disease activity.

In view of the evidence that alcohol use accelerates HCV related complications, some patients will stop or cut back a lot on alcohol use when they learn of their infection with HCV. However, through interviews conducted with HCV infected patients in drug treatment programs participating in the STOP Hep C research project,* we found that this was often not the case. Many of these patients continued to drink alcohol, often in large quantities. Some chose not to change their drinking behaviors despite knowledge of harm, others tried but were unable

to change, and some were unaware that a change was necessary. For example, some HCV infected patients thought that if they took other health-protective steps (like eating a healthier diet), the virus would not progress, even if they continued to drink. In fact, some felt that their health providers encouraged this thinking by playing down the health implications of an HCV diagnosis, thus leaving patients with the understanding that alcohol use is not problematic. Others' continued alcohol use was tied to having no disease symptoms. Many of these patients found it hard to give up the immediate pleasures of alcohol use (such as relaxation and avoiding boredom) in exchange for knowing that they were slowing the progression of their asymptomatic illness. For those whose HCV infection was more progressed and who suffered from HCV related depression, alcohol use temporarily relieved these feelings. Also

Shiela M. Strauss, Ph.D

Janetta M. Astone, Ph.D

National Development and
Research Institutes, Inc.
New York, NY

contributing to continued alcohol use among HCV positive patients was the desire to avoid the stigma of HCV infection. Because of its association with injection drug use, HCV is often a stigmatized disease that calls attention to past or present drug use behaviors. Some HCV infected patients (especially if they were asymptomatic), therefore chose not to disclose their

reminded themselves that they had a chronic illness (even if they had no symptoms), and learned as much as they could about the virus and the impact of alcohol use on the acceleration of the disease. For most, cutting down on their alcohol use required learning and using deliberate strategies to accomplish this health-preserving goal. These strategies included changing

tiveness and opportunities for HCV treatment, and causes a decline in health-related quality of life, there is a critical need for HCV infected patients - together with their health providers and social supporters - to act deliberately so that these patients can take the necessary steps to best preserve their health. ■

No matter what the reason for continued alcohol use, it is critical for those who have HCV to significantly reduce (preferable eliminate) this use. ■ ■


HCV infection. Especially if alcohol use was an important part of their socializing behaviors, they worried that their HCV infection would be exposed if they significantly changed these behaviors, including stopping or cutting back on this use. In fact, some partners, friends, and family of HCV infected individuals actually enabled their alcohol use.

No matter what the reason for continued alcohol use, it is critical for those who have HCV to significantly reduce (and preferably eliminate) this use. In our research, we learned that for some patients with HCV infection, it took getting very ill or knowing someone who became ill and died from the virus to encourage them to stop drinking. For others, it was important that they

daily routines, finding other recreational activities that did not involve alcohol, and avoiding triggers for alcohol use. Many needed to change their social networks to include non-drinkers. In the light of our findings, it is important for HCV infected patients to find and participate in support groups that consist of peers who are dealing with similar HCV-related issues. Current or past drug users also need to find physicians who are nonjudgmental of their drug use history, sensitive to their needs, and willing to take the time to discuss HCV-related issues respectfully and in language that is clear and understandable to them. Because alcohol use accelerates the progression of liver disease in HCV infected individuals, limits the effec-

** This work was supported by a grant from the National Institute on Drug Abuse, #R01 DA13409, "HCV Service Innovations in Drug Treatment Programs," informally known as the "STOP Hep C project." Since the year 2000, the research has been examining the implementation, use, and client and staff satisfaction with HCV services provided by drug treatment programs in the United States. Shiela Strauss is Principal Investigator, and Janetta Astone is Project Director of the STOP Hep C project at the National Development and Research Institutes, New York, New York.*

A publication of the
Hepatitis C Support Project



The Mission of the Hepatitis C Support Project is to offer support to those who are affected by the hepatitis C Virus (HCV), hepatitis B Virus (HBV) and HCV coinfections.

Support is provided broadly, through information and education, as well as access to support groups. The Project seeks to serve the HCV community as well as the general public.

Visit our web site at
www.hcvadvocate.org



**HEPATITIS C
SUPPORT PROJECT**

**Executive Director
Editor-in-Chief,
HCSP Publications**
Alan Franciscus

**Managing Editor /
Production**
C.D. Mazoff, PhD

Webmaster
C.D. Mazoff, PhD

Design
Paula Fener