



Hepatitis C Testing and Treatment Fell During First Year of COVID Pandemic

HCV treatment initiation dropped by 31% from March to April 2020 and remained low throughout the year.

November 26, 2021 By Sukanya Charuchandra

[Hepatitis C](#) testing and treatment fell by more than 30% during the early months of the [COVID-19](#) pandemic, according to findings presented at the AASLD Liver Meeting. While testing picked up again later in the year, treatment initiation remained below pre-COVID levels.

Several studies have shown that hepatitis C virus (HCV) testing and treatment dropped during the spring of 2020—the first wave of COVID-19 in the United States—but it is less clear whether these declines were sustained over the course of the first year of the pandemic.

Martin Hoenig, MD, of the University of California at San Diego, and colleagues used data from the national laboratory chains Quest and LabCorp to assess monthly statewide numbers for HCV testing and treatment, grouped according to patient age, from January 2019 through December 2020. The period between January 2019 and February 2020 was considered pre-COVID while March 2020 through December 2020 was considered the COVID period.

During the pre-COVID period, the monthly volume of hepatitis C testing declined modestly. But between March and April 2020, the number of HCV antibody tests (used to detect whether a person ever had the virus) fell sharply, by 37%, and the number of HCV RNA tests (used to determine current active infection) decreased by 38%.

Likewise, hepatitis C treatment initiation declined slightly during the pre-COVID period but dropped by 31% between March and April 2020. These trends were similar for different age groups and across states.

During the rest of 2020, HCV antibody and HCV RNA increased month to month, but only antibody testing returned to pre-COVID levels. In contrast, HCV treatment initiations remained low from April 2020 throughout the remainder of the year.

“While HCV testing increased again later in 2020, HCV treatment rates did not recover,” the researchers concluded. “Efforts should be made to link the HCV positive patients to treatment, and revitalize HCV treatment engagement by health care providers.”

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