


## Management of Acute HCV Infection

### Diagnosis of Acute HCV


Recommended Testing for Diagnosing Acute HCV Infection	
RECOMMENDED	RATING 
HCV antibody and HCV RNA testing are recommended when acute HCV infection is suspected due to exposure, clinical presentation, or elevated aminotransferase levels (see <a href="#">Testing Algorithm</a> figure).	I, C

### Pharmacologic Prophylaxis

Pharmacologic Prophylaxis Not Recommended	
NOT RECOMMENDED	RATING 
Pre-exposure or post-exposure prophylaxis with antiviral therapy is not recommended.	III, C


## Medical Management and Monitoring of Acute HCV Infection

### Recommendations for Medical Management and Monitoring of Acute HCV Infection


RECOMMENDED	RATING 
Regular laboratory monitoring is recommended in the setting of acute HCV infection. Monitoring HCV RNA (eg, every 4 to 8 weeks) for 6 to 12 months is also recommended to determine spontaneous clearance versus persistence of HCV infection.	I, B
Counseling is recommended for patients with acute HCV infection to avoid hepatotoxic insults, including hepatotoxic drugs (eg, acetaminophen) and alcohol consumption, and to reduce the risk of HCV transmission to others.	I, C
Referral to an addiction medicine specialist is recommended for patients with acute HCV infection related to substance use.	I, B

## Antiviral Therapy


### Recommended Treatment for Patients With Acute HCV Infection

RECOMMENDED	RATING 
If the clinician and patient decide that a delay in treatment initiation is acceptable, monitoring for spontaneous clearance is recommended for a minimum of 6 months. When the decision is made to initiate treatment after 6 months, treating as described for chronic hepatitis C is recommended (see <a href="#">Initial Treatment of HCV Infection</a> ).	IIa, C
If a decision is made to initiate treatment during the acute infection period, monitoring HCV RNA for at least 12 to 16 weeks before starting treatment is recommended to allow time for possible spontaneous clearance.	IIa, C

### Recommended Regimens for Patients With Acute HCV Infection

RECOMMENDED	RATING 
Owing to high efficacy and safety, the same regimens that are recommended for chronic HCV infection are recommended for acute infection.	IIa, C

## When Antiviral Therapy Is Not Recommended

NOT RECOMMENDED	RATING 
For patients in whom HCV infection spontaneously clears, antiviral treatment is not recommended.	III, B

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