What does the USPSTF recommend?

For adults aged 18 to 79 years:
Screen adults for hepatitis C virus (HCV) infection.

To whom does this recommendation apply?
Asymptomatic adults aged 18 to 79 years (including pregnant persons) without known liver disease.

What’s new?
This recommendation expands the population that should be screened. The USPSTF now recommends that all adults aged 18 to 79 years be screened. Previously, it recommended screening adults born between 1945 and 1965 and others at high risk.

How to implement this recommendation?
Screen. Screen adults aged 18 to 79 years with anti–HCV antibody testing followed by confirmatory polymerase chain reaction testing.

a. The USPSTF also suggests that clinicians consider screening persons younger than 18 years and older than 79 years who are at high risk for infection (eg, those with past or current injection drug use).

Adults with a positive screening test result are usually followed up with a diagnostic evaluation using 1 of various noninvasive tests. Treatment typically consists of oral direct-acting antiviral regimens for 8 to 12 weeks.

Important considerations include:
- Communicating that screening is voluntary and undertaken only with the patient’s knowledge
- Informing patients about HCV infection, how it can (and cannot) be acquired, the meaning of positive and negative test results, and the benefits and harms of treatment
- Providing patients the opportunity to ask questions and to decline screening

How often?
One-time screening for most adults.

Periodically screen persons with continued risk for HCV infection (eg, persons with past or current injection drug use). There is limited evidence to determine how often to screen persons at increased risk.
What are other relevant USPSTF recommendations?

The USPSTF has made recommendations on screening for hepatitis B virus infection in pregnant persons, hepatitis B virus infection in adults, and HIV infection.

Where to read the full recommendation statement?

Visit the USPSTF website to read the full recommendation statement. This includes more details on the rationale of the recommendation, including benefits and harms; supporting evidence; and recommendations of others.