

Michigan Department of Community Health Bureau of Laboratories

Hepatitis C Virus Result Reporting

Historically, laboratory testing for Hepatitis C (HCV) viral infection has been complex and non-standardized. Multiple assays are available to test for either HCV antibody (EIA, RIBA) or HCV antigen (PCR). Laboratories may run all or some of these assays resulting in confusion on the part of state and local epidemiologists as well as the medical community in general as to whether or not an individual is acutely or chronically infected.

In February 2003, the Centers for Disease Control and Prevention (CDC) published its "Guidelines for Laboratory Testing and Result Reporting of Antibody to Hepatitis C virus" in the Morbidity and Mortality Weekly Report (MMWR, Feb. 7, 2003. Vol. 52, No. RR-3). These guidelines, which include a recommended test algorithm and result reporting, were formed by a consensus of federal and state government, the American Society for Clinical Pathology, the National Academy of Clinical Biochemistry, the American Association for Clinical Chemistry, the American Clinical Laboratory Association, Emory University School of Medicine, the American Society for Clinical Pathology, the American Clinical Laboratory Association, the College of American Pathologists, and the Association of Public Health Laboratories. The document is posted at: [www.cdc.gov/mmwr/preview/mmwrhtml/rr5203a1.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5203a1.htm).

In order to reduce the confusion surrounding HCV testing, the Michigan Department of Community Health (MDCH) Bureaus of Laboratory and Epidemiology recommend clinical laboratories review and adopt these CDC guidelines for testing and reporting. Laboratory results provide guidance for individual diagnosis and treatment and also, on a national level, for prevention activities based on prevalence of infection. To increase the ease of report interpretation by physicians and local public health, we ask that labs review their report format to ensure they include information such as signal-to-cut-off ratio (s/co) or language to indicate they are utilizing the CDC algorithm.

Additional HCV resources:

2005 case definition for "Hepatitis C Virus Infection, Past or Present"

<http://www.cdc.gov/epo/dphsi/casedef/hepatitisccurrent.htm>

2007 case definition for "Hepatitis C Virus Infection, Acute"

<http://www.cdc.gov/epo/dphsi/casedef/hepatitiscacutecurrent.htm>

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