

GOOD LIVER

NEWSLETTER OF THE HEPATITIS C COUNCIL OF VICTORIA



living: managing; finding support

**NATIONAL HEPATITIS C AWARENESS WEEK
1-6 OCTOBER 2006**

**THERE ARE THOUSANDS OF NEW HEPATITIS C INFECTIONS EVERY YEAR IN AUSTRALIA.
SEVENTY FIVE PERCENT OF THESE WILL DEVELOP INTO CHRONIC HEPATITIS C.**

Chronic health conditions affect people both physically and emotionally. They have a long-term impact on health, well being and quality of life. The severity of symptoms may vary on a daily basis and can have a significant effect on the ability to work productively, perform day-to-day activities, and manage relationships. Learning ways to self manage the challenges associated with chronic hepatitis C can make people feel more in control of their lives.

The 2006 National Awareness Week is about self management of hepatitis C. Enclosed in this issue of Good Liver you will find articles that may help you take control. Check out the National Awareness Week website which has lots of useful information about lifestyle, support, symptoms, treatment and useful links and contacts.

FIND OUT MORE ABOUT WHAT YOU CAN DO - SO HEPATITIS C DOESN'T CONTROL YOUR LIFE!



HEPATITIS C COUNCIL OF VICTORIA INC

Suite 5, 200 Sydney Road,
Brunswick, Victoria 3056
Telephone: 03) 9380 4644
Country Callers: 1800 703 003
Facsimile: 03) 9380 4688
Email: info@hepcvic.org.au
Web: www.hepcvic.org.au

CONTACT THE COUNCIL STAFF:

Helen McNeill
Executive Officer
Telephone: 9385 9102
helen@hepcvic.org.au

Genevieve Dickson
Office Coordinator
info@hepcvic.org.au

Venetia Brissenden
Policy Development and Education
Custodial Settings
Telephone: 9385 9104
venetia@hepcvic.org.au

Jen Johnson
Community Development
and Education - Rural
Telephone: 9385 9105
jenj@hepcvic.org.au

Piergiorgio Moro
Community Development
and Education - Metro
Telephone: 9385 9103
pier@hepcvic.org.au

Heather Smith
Communications and Publications
Telephone: 9385 9107
heather@hepcvic.org.au

The Good Liver is produced by the Hepatitis C Council of Victoria. The opinions and language expressed in this newsletter are not necessarily those of the Council or the Department of Human Services.

Reader Response

Your comments or experiences in regard to any articles in the Good Liver are welcome. Call, write or email: heather@hepcvic.org.au

news:

GENE HEP C HOPE

Melbourne scientists are part of a team that has discovered a gene that blocks the reproduction of the hepatitis C virus.

Scientists reproduced the virus in mouse cells and showed how the gene protein kinase R can block its spread.

The discovery might help shed some light on why some hepatitis C patients responded better to treatment than others.

The research, published in the Journal of Virology, was done at Monash Institute of Medical Research in collaboration with two US institutions.

Herald Sun August 2006

HEP C TRIALS A WORLD FIRST

Melbourne scientists are about to begin world-first human trials on a new treatment for hepatitis C that they hope will be much more successful than current hit-and-miss therapies.

Doctors at Melbourne's Burnet Institute have developed a new treatment likely to minimise the damaging outcomes of hepatitis C infection. The treatment uses a patient's own white blood cells, which are matured in the laboratory then transfused back into the patient.

Prof Eric Gowans, head of the scientific team at the Burnet Institute, said he hoped to start treatments within months. The treatment uses the patient's own immune response to boost the fight against the virus. If successful, the treatment could cut treatment from 6-12 months to just one month.

Prof Gowans is seeking people with hepatitis C to participate in clinical trials of the new treatment. Suitable trial participants must be hepatitis C (genotype one) positive and have already had treatment with interferon or ribavirin that failed.

Anyone interested in taking part in the trial can contact Prof Gowans on 03 9282 2204.

Herald Sun June 2006

CONGRATULATIONS!

Helen McNeill, our Executive Officer and the President of the Australian Hepatitis Council (AHC), has recently been appointed to the Commonwealth Ministerial Advisory Committee on AIDS, Sexual Health and Hepatitis (MACASHH) - Hepatitis C Subcommittee.

The subcommittee is chaired by Professor Bob Batey, and provides policy advice to Minister Abbott through the over-arching MACASHH chair, Hon Michael Wooldridge. Appointments are made on a personal basis and we congratulate Helen on her appointment and welcome the establishment of links with this significant subcommittee.

VIRTUAL SUPPORT GROUP

If you can't get to a support group why not try logging onto the internet community forum run by the NSW Hepatitis C Council.

<http://hepatitisc.communityzero.com>

contents

- 2 NEWS
- 3 COMMUNIQUE: EO reports
- 4 SELF MANAGEMENT: Head space
- 5 ON THE ROAD: Rural awareness
- 6 SELF MANAGEMENT: Weight
- 7 SELF MANAGEMENT: Exercise
- 8 SELF MANAGEMENT: Alcohol
- 9 SELF MANAGEMENT: Prevention
- 10 MY STORY: How I self managed
- 12 SELF MANAGEMENT: Diet
- 14 FROM THE INSIDE: Peer educators
- 15 ERC@THE ALFRED: Help you take control
- 16 HELPLINE: Here to help
- 17 DIARY:
- 18 CONTACTS: Here and far
- 20 MEMBERSHIP: So what's your story??

SHARE YOUR HINTS FOR A CHANCE TO WIN!

Members will have received an invitation in the mail recently to share their hints on how they self manage their hepatitis C. If your hints are published by the AHC, you will win a lovely pamper pack full of lots of lovely things to indulge yourself with!

THE GREAT NEWS IS THAT THE DEADLINE HAS BEEN EXTENDED TO SEPTEMBER 22.

For more details go to the news page on the Council web site. www.hepcvic.org.au. Lets hear your hints!

AUSTRALIAN AMPHETAMINE CONFERENCE

Conference organisers, Anex, believe this event will provide the opportunity for all delegates to understand the scope of amphetamine issues and their impact and to find new perspectives and approaches to amphetamine challenge.

It will be structured differently from other conferences, including more discussion and active participation in all sessions, so delegates can contribute to the knowledge base for innovative responses to this issue.

September 28 +29 in Sydney, for more details go to: www.amphetamines.org.au.



BIG THANK YOU TO HEPCHAT SUPPORTERS

Once again, the listeners of the Councils' weekly radio program - HepChat - have responded overwhelmingly to the call for support of the annual 3CR Radiothon.

With your help, HepChat again reached its target. The Hepatitis C Council of Victoria would like to thank all those who donated for their continued support.

If you haven't donated yet, you can still do so by visiting the 3CR website www.3cr.org.au or phoning 03 9419 8377 during office hours.

Your generosity means we can all continue to listen to HepChat every Thursday from 10.30am, 855 on the AM band.

WELCOME TO THE NATIONAL HEPATITIS C AWARENESS WEEK 2006 EDITION OF GOOD LIVER.

Self-management of hepatitis C is the theme for this years campaign, and as usual Victoria is running its own Awareness week. We are again grateful to the large number of organisations that support the week by hosting events and activities across the state.

There has been a lot of talk in recent times about improvements in treatment, and I certainly do not want to detract from the gains that we have made in this area.

Treatment is now more readily available, management of side effects has improved and there are better outcomes. This is all good news. Nevertheless, for many valid reasons treatment may not be on the agenda for a large number of people, and there is so much that can be done to take control and manage life with hepatitis C.

Research is telling us a number of important things about how to minimise or reduce the chance of developing more serious liver disease. The biggest pile of evidence is around the damage that alcohol does to people with hepatitis C - even just reducing your intake can have significant benefits. Also, more recently it has been demonstrated that maintaining a healthy body weight can be very beneficial for a number of reasons.

I have always described a good self-management plan as being similar to a really nice pie - a lot of different ingredients working together to create something pretty tasty! Only using one ingredient wouldn't make the pie very good. With hepatitis C there is rarely just one thing that people can do to take care of themselves. Like my pie, you need a combination of things for it to really work. The key to all this though is knowing the full spectrum of options for managing hepatitis C. The list is quite long. Have you considered:

- Reducing the amount of alcohol that you drink (or eliminating it completely).

- Starting an exercise and healthy eating program to help you to maintain a healthy body weight.
- Doing a relaxation course.
- Consulting a naturopath to see if some of your symptoms can be better managed.
- Talking to your doctor about referral to a liver clinic so you can be fully assessed and know what your options are.
- Phoning the Hepatitis C council to request some information about managing hepatitis C.

These are just a few suggestions to think about. Ultimately I believe that the old saying 'Knowledge is power' applies well to managing hepatitis C. Unless you know what all of your options are, and experiment to find out what combination of ingredients you need in your personal self-management plan, you may not be doing as well as you could. I would strongly encourage you to make sure you know as much as possible about hepatitis C and how to manage it. Reading our information booklet 'Impact' might be a good place to start if you think you don't know as much as you need to.

I hope you find information and inspiration in this edition of Good Liver to assist you in managing hepatitis C.

Warm regards

Helen McNeill
Telephone: 03 9385 9102
Email: helen@hepcvic.org.au

HEALTHY MIND, HEALTH BODY

THINKING IN A MORE POSITIVE WAY:

The way we think and feel affects our behaviour. When we are feeling flat and unhappy our thoughts are more likely to be negative. We can become withdrawn, less motivated and lose interest in doing things that we would normally enjoy.

Challenging your thoughts or the way you are thinking can help you to feel, think and behave more positively. Try to:

- Focus on the positive things around you.
- Reduce the amount of time you spend thinking, worrying or talking about feeling unhappy.
- Avoid comparing your feelings with others, or how you felt 6 or 12 months ago.
- Resist the temptation to do what your thoughts are telling you. For example: challenge the urge to sit around and do nothing, rather, take some time to plan your day and do some activities you enjoy. It may be hard to get going. However once you do you will feel more positive.
- Remember that we all have good and bad days. On a 'bad day' try to remind yourself that you will get through it, you have moved forward before and can do it again.

Managing negative thoughts

Here are some tips to help you manage your negative thoughts. It is hard work and takes time and practice to change but don't give up! If you think in a more positive way your thoughts will become more positive and pleasant.

Scheduling Worry Time

If you are a worrier, perhaps you could spend a certain time each day focusing upon your worrying thoughts. It may help to choose a particular chair or room for this purpose. For the rest of the day push the worrying thoughts out of your mind. Save them up for your "worry time" tomorrow. For example:

My worrying time will start at ____am/pm.
It will last for ____ minutes.
I will go to ____ (room) for my worry time.

Increasing Positive Thoughts

- Keep a journal or diary. Each day write down all the things you have enjoyed or achieved. It doesn't matter if they are little things.
- Notice your efforts, achievements and the jobs you have done well. Pat yourself on the back and praise and reward yourself. You can have control.

SUPPORT:

When we are feeling low and going through a difficult time most of us need a bit of extra support.

It is good to have family and friends and people who care about us around. However, sometimes our problems may be too hard for our family and friends or we don't feel comfortable going to someone we know. At these times asking a health professional for assistance can help.

Asking for help does not mean you are crazy or unable to cope. You are taking control and acknowledging that some professional assistance or advice may help.

Support means different things for different people. Everyone is different and what is helpful for one person may not be helpful for another! Here are some suggestions.

- Talking to a trusted friend
- Talking to a counsellor
- Peer counselling
- Spending time with friends
- Calling a crisis service or hotline
- Arranging not to be alone
- Going to a support group
- Spending time with a pet
- Talking to your doctor, social worker, psychiatrist, psychologist, nurse, pastoral care worker

RELAXATION

Stress is a normal part of living. If you are stressed you may be more likely to be depressed. How you manage stress has a large effect on how you feel.

Having Hep C can be overwhelming and stressful. It is normal, at times, to feel helpless, shocked, sad, angry, frightened and frustrated. There are a lot of questions that have few answers.

A good way to combat this is to look into ways that help you to reduce the stress in your life. Start with the smaller things that stress you and then build up to the bigger ones. Nurturing and caring for yourself and others is a great start.

There are a number of types of relaxation strategies which can help you to manage stress. Find one or several that suit you and your lifestyle.

Journal or Diary writing or drawing.

Writing or drawing your feelings and thoughts can help enormously. It is a creative way of expressing your feelings rather than letting them build up.

Massage

You may want to have a regular massage - which is very relaxing not only for your body, but also for your mind.

Exercise

A swim, walk or other exercise can be terrific for relieving stress and clearing your mind.

Meditation

Meditation is an excellent way of reducing stress and worry. Some forms of meditation focus more on the mind and involve slowing and controlling breathing. Others include movement-based practices such as Yoga and Tai Chi which work equally with your mind and body.

Water

Have a long, warm bath. Put a couple of drops of your favourite essential oils or bath product in the bath and lie back and relax. Reading in the bath can also be relaxing. If you don't have time for a bath, fill your basin or sink with warm water. Soak both hands as deeply as possible and count slowly to 20. A shower can also be relaxing.

Aromatherapy

Use oils such as lavender, geranium, bergamot and sandalwood in your house to provide a calming and peaceful atmosphere.

Music

Playing or listening to music helps many people to relax.

Relaxation tapes

You can borrow these from libraries or the Education and Resource Centre at The Alfred.

Breathing strategy

Some people find it useful to learn to relax by using breathing techniques. When the focus is on breathing, other concerns or worries are pushed away and your whole body can slow down and relax. The steps below are an example of a breathing technique. The more you practice the easier and less strange it will feel.

1. Find a comfortable, quiet location.
2. Breathe in through your nose, hold your breath for 10 seconds.
3. Breathe out through your mouth or nose; whichever is more comfortable for you. As you breathe out say 'Relax'.
4. Breathe smoothly, evenly and rhythmically: in for 3 seconds, out for 3 seconds. Do this for 1 minute.
5. Focus your attention on breathing and counting.
6. Use your diaphragm (which is between your lungs and stomach) to control your breathing. Try and keep your chest still. This will improve with practice.
7. Practice these techniques twice a day for five minutes each time. Try and do them every day.
8. When you are feeling stressed or in a situation where you may feel stressed, practice this breathing technique as a way to calm down.

From 'Healthy mind Healthy Body' booklet by Alfred Hospital, Melbourne with thanks.

Self managing the Awareness Week!!

WITH OCTOBER GETTING EVER CLOSER, PEOPLE ACROSS VICTORIA (AND INDEED AUSTRALIA) ARE THINKING ABOUT WHAT THEY WILL DO DURING 2006 HEPATITIS C AWARENESS WEEK.

For people living with hepatitis C in regional Victoria, the idea of self-management is probably a familiar one. After all, with limited services for hepatitis C treatment and general hepatitis C medical support, many people with the virus are well accustomed to looking after themselves.

The biggest issue for rural communities is access to services. This refers to both the lack of appropriate services for people with hepatitis C, as well as the stigma and discrimination that continue to affect people's access to health care.

Because we don't have the budget to flood the whole Victorian community with printed information about self management and how to live with the virus, we will be relying quite a bit on the national website. It will be up and running by mid September, so make sure you go in for a visit: www.hepcawareness.net.au.

There will be bags of stuff on topics like eating/sleeping well; exercise; transmission; keeping your headspace positive; relaxation; tips on dealing with symptoms; managing treatment side effects; disclosure and of course, finding support.

As in 2005, we are again putting most of our media efforts into rural newspapers and radio to attract attention to the services that do exist, and to try and reach people who may feel they are alone in their regional homes.

So what's happening in your area for hep C Awareness week?? If you are running an event then drop us a line! We'd love to hear what's happening out in your community. Especially let us know if the Council can help in any way. There will have a program of the weeks' events on the national website and we can add your event so people can find out what is going on in their area.

OTHER NEWS

We are still waiting to hear about the opening date for the new BBV clinic in Bendigo. We are sure, however, that this brand new service will be well worth the wait and anticipation. When the doors finally do open, the hep C community in Bendigo and for miles around will be able to access quality clinical care and support without having to travel to Melbourne. The service will make a real difference for many people in regional Victoria.

Remember - if you would like to receive our indepth rural newsletter, the rural~e news, contact Jen on 1800 703 003 or send an email indicating your interest to info@hepcvic.org.au

Jen Johnson
Rural Education and Community
Development

IF YOU WOULD LIKE TO RECEIVE THE RURAL~E NEWS SEND AN EMAIL INDICATING YOUR INTEREST TO INFO@HEPCVIC.ORG.AU

HEPATITIS C AND TYPE 2 DIABETES: IS THERE A RELATIONSHIP?

There has been a flurry of research over the last few years into the relationship between chronic hepatitis C infection and type 2 diabetes. That a relationship exists makes sense when you think about the major role the liver plays in coordinating the internal environment of the body, including helping to maintain blood glucose levels.

We know that both obesity and hepatitis C can cause liver damage, as can diabetes, and that obesity is a major causative factor in developing type 2 diabetes. But what researchers have been discovering over the last couple of years is that type 2 diabetes is more prevalent among people with chronic hepatitis C infection compared with those with other liver diseases and the general population. This prevalence seems to exist irrespective of whether or not cirrhosis (extensive liver damage) is present and across different ethnic groups. Could this mean that HCV is also a causative factor in developing type 2 diabetes? Some researchers are beginning to think so.

One of the best predictors for developing type 2 diabetes is a condition called insulin resistance, which often precedes the onset of the diabetes by 10 to 20 years (Hui: 2003). While damage to the liver can itself have a causal relationship to insulin resistance, studies are beginning to show that this causal relationship may also work the other way. In other words, insulin resistance may cause fibrosis, which can then decrease insulin sensitivity, which then in turn increases liver damage. Significantly, studies are also finding that a relationship seems to exist between hepatitis C and insulin resistance even after factors such as body mass index (BMI), waist to hip ratio (WHR), obesity, age, gender and alcohol use are taken into account.

One study looked at 121 people with chronic hepatitis C, with only minimal or no fibrosis, and compared them with healthy people without hepatitis C, matched by sex, BMI and WHR. The study

found that those people with hepatitis C - even though they were younger than the control group - had significantly higher levels of all markers for insulin resistance (Hui: 2003).

So what is insulin resistance? The hormone insulin is naturally secreted by the pancreas. It has many functions, perhaps the most important of which is facilitating the delivery of glucose and amino acids into our cells. It also aids in the storage of glucose in our liver and muscles. Most body cells have special insulin receptors which, when triggered, allow glucose into the cell. The more receptors a body has, the more insulin sensitive that body is. If the number of receptors is low, or the receptors are compromised in some way, the body is said to be 'insulin resistant'. The pancreas responds to insulin resistance by secreting more insulin. Unfortunately, the pancreas has a limited capacity to produce large amounts of insulin. If overextended the pancreas can 'burn out' and become unable to produce much insulin at all. When this happens a person has developed diabetes. In serious cases a person may become dependant on injections of synthetic insulin.

Insulin resistance is commonly seen in people with hepatitis C. Experimental data suggests that certain viral components of HCV may induce insulin resistance directly and that this occurs early in the course of infection. Insulin resistance, therefore, may be mediated by both viral and host factors (Charlton, et al: 2006). In other words, both the virus itself and a person's lifestyle or other factors (environment, genetics, other illnesses etc) may contribute to the development of insulin resistance. Once someone with hepatitis C has insulin resistance, they may experience more rapid fibrosis progression. Insulin resistance may also make it more difficult for overweight people to lose weight and keep it off and certainly increases the risk of developing type 2 diabetes (Hickman, et al: 2004). Both obesity and diabetes can also increase fibrosis progression.

Interestingly, there seems to be a relationship between hepatitis C genotype and the development of either insulin resistance or hepatic steatosis (fatty liver disease). Genotype 3 seems to be less likely to cause insulin resistance but is associated with more extensive hepatic steatosis even in people who are not overweight (Charlton, et al: 2006, Heathcote; 2002). Insulin resistance and also diabetes are more prevalent among people with genotypes 1 and 2 (and may in fact be a cause rather than a consequence of hepatic steatosis in this group) (Charlton, et al: 2006).

So, what are the implications for you? If you have chronic hepatitis C, in particular genotypes 1 or 2, you may be at greater risk of also being insulin resistant. Being insulin resistant may in turn increase your risk of gaining weight, developing type 2 diabetes, high blood pressure, high 'bad' cholesterol and low 'good' cholesterol, and polycystic ovarian syndrome (in women), not to mention potentially worsening the damage to your liver from the hepatitis C virus. If you haven't already done so, it may be worth talking with your GP about getting tested for insulin resistance and making sure you have regular blood glucose checks. It is worth noting that, while insulin resistance seems to make being overweight more likely, not everyone with insulin resistance is overweight.

The good news is that it is possible to perhaps reduce insulin resistance or at least manage it by making some key lifestyle changes. Exercise is important, as is reducing our saturated fat intake, but evidence is emerging that the type of carbohydrates that we eat may play a crucial role in insulin production and absorption in the body. GPs, endocrinologists and nutritionists are now increasingly recommending that people with insulin resistance and/or type 2 diabetes try to keep to a diet that registers low on the "glycemic index" (a low GI diet). The glycemic index specifically identifies the

effect that different foods have on blood glucose levels. Eliminating a lot of high GI foods and increasing your consumption of low GI foods can help prevent the pancreas 'burn out' that leads to diabetes. A low GI diet combined with portion control and regular exercise can also assist in losing weight, which has been shown to slow down liver damage and in some cases even lead to a decrease in fibrosis. Even if you do not have any problems yet, adopting healthy eating habits now may save you grief further down the track.

Although in general complex carbohydrates (such as whole grains, beans and legumes) are low GI and simple carbohydrates (such as non-sourdough white bread) are high GI, there are also some surprises. For example al dente white pasta is low GI and ordinary wholemeal bread can be high GI. So if you are thinking of switching to a low GI diet, it's a good idea to find a good book on the subject. There is an Australian series by Jennie Brand-Miller and others called *The New Glucose Revolution*, which includes GI counters, menu plans and other titles, available in most book stores.

Whether you are insulin resistant or not, the evidence shows that being overweight and/or obese can increase the damage to your liver caused by hepatitis C. In addition, people who are overweight are less likely to respond to pharmaceutical treatment. Fortunately, studies show that even a small reduction of weight (4%) can improve liver health.

Overall, gastroenterologists are more likely these days to consider factors such as insulin resistance and weight management in their treatment of patients with hepatitis C. It may be that down the track some of the medications used to increase insulin sensitivity in people with type 2 diabetes, such as metformin (glucophage), will also be prescribed to help people manage hepatitis C.

Venetia Brissenden
Policy Development and Education -
Custodial settings.

REFERENCES

- Brand-Miller, J (et al) *The New Glucose Revolution*, Hodder: Sydney, 2004.
- Charlton, M R (et al) "Impact of obesity on treatment of chronic hepatitis C", *Hepatology*, June 2006; 1177-1186.
- Heathcote, J "Weighty issues in hepatitis C", *GUT* 2002; 51:7-8.
- Hickman, I J (et al) "Effect of weight reduction on liver histology and biochemistry in patients with chronic hepatitis C", *GUT*, 2002: 51: 89-94.
- Hickman, I J (et al) "Modest weight loss and physical activity in overweight patients with chronic liver disease results in sustained improvements in alanine aminotransferase, fasting insulin, and quality of life", *GUT* 2004; 53:413-419
- Hui, J, "Insulin resistance is associated with chronic hepatitis C and virus infection fibrosis progression", *Gastroenterology*, December 2003; V 125, No. 6.
- Muzzi, A (et al), *Insulin Resistance is a associated with liver fibrosis in non-diabetic chronic hepatitis C patients*", *Journal of Hepatology* 42, 2005: 41-46.
- Yoon, E J & Hu, K, "Hepatitis C virus (HCV) and hepatic steatosis", *Int J Med Sci*, 2006; 3: 53-56.

EXERCISE: A HEALTHY HABIT

Exercise as a form of treatment for chronic hepatitis C-related fatigue has had little attention in research studies. However, data from studies in closely related chronic conditions consistently reports the value of exercise for maintaining/improving health and reducing risk factors. Some main points from this data are:

- Exercise is effective in reducing self-reported fatigue in patients with chronic hepatitis C infection.
- Maintenance of weight loss and exercise in overweight patients with liver disease results in a sustained improvement in liver enzymes, serum insulin levels and quality of life.
- Weight reduction and exercise can improve liver function in patients with fatty liver.

The benefits of exercise are widely acknowledged. Apart from building and maintaining healthy bones, muscles and joints, people with hepatitis C can use exercise to reduce the effects of the symptoms of the virus, and the side effects of treatment. Regular exercise strengthens the immune system, improves stamina and helps overcome fatigue. After exertion, people report improvement in their quality of sleep - leading to more positive moods and a general feeling of psychological wellbeing - all of which helps towards decreasing depression & anxiety.

BECOMING ACTIVE

Lack of motivation and procrastination can be your biggest enemies - but be determined. Start by making a commitment to yourself and set realistic goals. Try to incorporate movement and activity into your normal daily routine.

How often you should exercise depends on your current level of fitness. Start with short sessions and gradually increase the intensity of your workouts as your fitness improves. Beginners can start with 2 or 3 sessions a week. At intermediate level you should be exercising at least 3 times a week, then increasing to 4 to 5 times a week as you get fitter.

The optimum structure of your exercise program would cover four phases. Warming up before exercise is the best way to reduce the risk of injury. Cold joints, tendons and

Continued on page 11

AM I DRINKING TOO MUCH?

Alcohol in combination with hepatitis C may increase the amount of damage to your liver.

HEPATITIS C AND ALCOHOL

There are strong links between excessive levels of alcohol consumption and the development of cirrhosis and hepatocellular carcinoma (liver cancer). Alcohol may interact with treatments for hepatitis C or other drugs, legal and illegal, so it's important that you consult with your doctor or health care service to discuss possible interactions.

If you decide to drink, it is important to remain under the level of consumption outlined in the Australian Alcohol Guidelines. Regular alcohol free days help you to remain in control of your drinking and reduce the likelihood of your drinking becoming worse.

THINGS TO REMEMBER

- The Australian Alcohol Guidelines are based on average weights, so if you are below average weight, you might need to reduce the amount you drink.
- Women are more susceptible to the effects of alcohol, which is why there are lower recommended limits for women.
- It takes one hour for 1 standard drink to pass through the bloodstream (including the liver).
- Drinks served at home and some venues are often larger than a standard drink.

IF YOU HAVE A PROBLEM

If you have a health or social problem related to, or made worse by alcohol (including alcohol dependence) you should consider not drinking at all. It would be advisable to stop drinking for at least several weeks or months, then try drinking at low levels under the supervision of your doctor. (The appropriate level will vary from person to person.) If you have a severe health problem that is made worse by alcohol (eg cirrhosis of the liver) you should never drink.

If you have hepatitis C, or another form of chronic viral hepatitis, you should consider

drinking only infrequently and well below the levels recommended in the general guidelines.

AUSTRALIAN ALCOHOL GUIDELINES

Women: no more than 2 standard drinks per day on average (spread out over several hours) and no more than 4 standard drinks on any one day. With at least 1 or 2 alcohol free days per week.

Men: no more than 4 standard drinks per day on average (spread out over several hours) and no more than 6 standard drinks on any one day. With at least 1 or 2 alcohol free days per week.

WHAT TO LOOK OUT FOR

- Difficulty in managing the amount you drink.
- Withdrawal symptoms (tremors or anxiety).
- Increased stress levels or disrupted sleep.
- Relationship or sexual difficulties.
- Stomach complaints or pain.
- Increased aggression or violence.
- Diminished judgement and performance.

WHAT CAN YOU DO?

1. Make a decision:

The first step is to make a decision about whether you believe your drinking is harmful to you, and what you are prepared to do about it. 'Weigh up' the positives and negatives of drinking to identify things that will support you in achieving your goals, or things that make it difficult. Think about how cutting down or stopping drinking will improve your liver health.

2. Come up with specific goals and ways to achieve them:

- What exactly is it that I want to do? (e.g. limit myself to 5 drinks per week, only have a few drinks on the weekend).
- Who can I rely on to support me? Ask them to help you succeed.
- When is it easiest to not drink? These days might be your alcohol-free days.
- What have I done in the past to reduce or stop drinking? Did this work? Why?

3. Put your plan into action:

- Draw up a drink roster to monitor your progress.
- Plan your week in advance and allocate a certain number of drinks on certain days, staying within your personal limit.
- Avoid situations where you feel pressured to drink. Practice saying no to offers of drinks - it does get easier.
- Compare how you feel when you drink and when you don't drink. What differences do you notice?
- Drink slowly. Space out the number of drinks you have. Alternate alcoholic and non alcoholic drinks.
- Eating while drinking helps reduce intoxication. Look for low/no-alcohol drinks in your venues or at supermarkets.

4. Keep it going:

Check in regularly with friends and family, or health care workers who have assisted you. Take these opportunities to identify those situations and people that aren't supporting you and come up with ways to deal with these. Look for other areas of your life you can work on. Improving your diet, exercise and sleep habits can help reinforce your personal 'healthy habits' and you may find that you don't want to drink as often, or at all.

Importantly, remember why you're doing this. Most people who want to change their drinking can do so with the right planning and support.

WHERE TO FIND SUPPORT

- Tell trusted family and friends about your plans and ask them to help you.
- Directline: Alcohol and Drug Information Service. 1800 888 236.
- Hepatitis Council of Victoria: 03 9380 4644 or 1800 703 003
- Your GP or local Community Health Centre

From a Hepatitis C Council of Queensland resource with thanks.

GOOD HABITS: SELF MANAGEMENT AND PREVENTION

Where does hepatitis C prevention fit in to the Self Management theme for Hepatitis C Awareness Week 2006? As we continually work towards making Victoria a better place for people living with hepatitis C, we also need to think creatively about how we go about preventing its further spread within our communities.

The prevention of hepatitis C is based on an understanding of how the virus is transmitted, but transmission is only the beginning. Often it is assumed that if a person or group understands how it is transmitted, than that is the same as hepatitis C prevention. Many people who get hepatitis C nowadays know how it is transmitted. But new infections continue to occur, and these are largely the result of unsterile injecting practices. We know that statistically, around 60% of current injectors are hepatitis C positive. We know that, while the majority of people who do have hep C are men, young women are the fastest growing population of people who are newly infected. Also, 1 in 5 new infections are in young people under 20. So how can we make a difference?

One of the things that stands out to us at the Council is that a large number of people who have hepatitis C actually know very little about it. At the time of diagnosis, many people were told that they had the virus, but were not given any further explanation about it. Because it has no immediate symptoms, people put off thinking about their diagnosis because they've got more immediate things to deal with. From my years of working at NSP services, I've noticed that this lack of hepatitis C information is much more common amongst people who use drugs.

Most NSP service users associate hepatitis C with drug use, but is it being talked about? If communities of people who use drugs had better information about hepatitis C, and it was shared in conversation with friends and associates, then things would change. Certainly that's the aim of peer education initiatives related to drug safety and hep C prevention. VIVAIDS, the Victorian Drug User

Organisation, is an excellent contact point for anyone interested in developing a peer education initiative in their local area.

While we know that 60% of current injectors have hepatitis C, it is crucial that we never lose sight of the remaining 40%. While our wish-list might include things like 24-hour syringe vending machines and safe injecting facilities, the current policy environment does not allow for these facilities to exist in Victoria. So what can we do to ensure that this 40% of people remain hepatitis C free?

With the exception of newer injectors, there aren't too many people out there who don't know that sharing syringes and other injecting equipment is a dangerous, high risk activity. The issue is not so much about knowledge; it is about managing the circumstances. Emergencies, when clean injecting equipment cannot be accessed, occasionally do happen. The crucial issue, then, is how people plan to avoid these emergencies, and about how people deal with emergencies when they do happen. For people living in regional areas, these issues are even more significant.

GOOD HABITS:

- Whenever you can, get loads of clean equipment. If you have privacy concerns about using your local NSP, send in a friend, or put on a fake moustache, or pick up from a nearby town when you're passing through. Preparation. Preparation. Preparation. Whenever possible collect syringes in boxes of 100, even if it seems ridiculous. Ask around about which NSPs are the best to use. If you are not comfortable using your local NSP, why not call or email us and tell us your concerns? We might be able to be of assistance.
- Learn correct sterile injecting technique. Contact your local 'mobile drug safety worker', VIVAIDS or the Hepatitis C Council. Many an 'experienced' injector has been surprised to learn that their technique was not as 'sterile' as they had thought!!

- If you're helping someone else with their shot, that's a big responsibility. It's also a big risk to you. Even with clean equipment, there is the very real possibility that blood from one person's injecting site might come into contact with another's injecting site or equipment. ALWAYS wash (or swab) your hands before and after every shot. It is irrelevant if a person knows their hep C status. The issue is about blood.
- Lots of people use drugs in 'love' relationships. Too many people look back and regret sharing equipment, which was done as an act of love, without regard for the consequences. Just don't risk it.

MANAGING EMERGENCIES:

- Keep an emergency stash of clean fits in the house, in your car or in some other cunning hiding spot. Emergencies happen. Remember it's not illegal to have clean fits. Importantly, never ever admit to using.
- Keep your head, and try not to get caught up with the need to inject. Snorting, swallowing or smoking might not scratch your itch straightaway, but the effects will be the same. Protecting yourself from BBVs is more important.
- Know what to do if you have no choice but to re-use. Get into the habit of rinsing out fits with cold water after using them. Consider having a marked disposal container that is only used by you. If you do need to reuse, do your best to reuse your own syringe, rather than someone else's.
- Know how to clean a fit. Always have bleach in the house, or be prepared to go on a mission to get it. Fit cleaning is based on the principle of '3x3x3'. Pull apart the fit, soak, shake and flush it 3 times each in water, then bleach, then water again. Use three separate containers for each step of the process.

Jen Johnson

Education and Community Development
Rural

My Story

HOW I SELF MANAGED MY HEP C TREATMENT

Having spent most of my life in pretty good health I was becoming increasingly irritated with some nagging, low-level health problems that no doctor seemed to be able to get to the bottom of.

Some of these problems came in the form of a series of bouts of what seemed to be food poisoning, which I had never suffered before in my life. I was also becoming increasingly tired and irritable, and after about 3 years of going to the gym and putting on about 6 kilos and feeling pretty buff, I was finding that I was losing weight and had to decrease the weights after building them up. It didn't make sense. Was I just getting old or was there something more sinister in the wind?

After seeing three doctors I eventually found one who had the good sense to perform some blood tests. Here's a health tip: If you front up to a doctor with some nagging problem and they don't even do the painfully obvious like do a blood test or whatever - then look elsewhere.

So here I was after about a year of feeling not quite right, finding out I have hepatitis C and have had for most of my life! I hadn't had a serious illness ever so it came as some surprise when he told me that I had it. On one hand it was strangely

relieving - here was something that might explain what I had been experiencing, but on the other hand here I was with potentially nasty disease that was particularly difficult to cure. Not to mention the stigma attached to it!

The doctor said that I could live a normal life with the virus but I would have to make some adjustments. Or I could go on to treatment and have a 50/50 chance of getting rid of it for good. Well, the idea of having any disease at all didn't sit well with me so I quickly came to the decision to have it treated. Who knows what else it had been doing to me over all of those years?

Following the diagnosis, I quickly gathered as much information about the virus and the treatment as I could : from the clinic; I found a huge amount on the internet from the Hepatitis C Council of Victoria and US hospital websites and the like; did a bit of self diagnosis; looked at the likely outcome for me after finding out that according to US statistics for some unfortunate reason obese people, American Negroes and people with compromised immune systems had a lower chance of a successful outcome than the rest of the population. Since I was none of these, and that the 50% success rate had to be an average of all of those treated, I felt had a better than 50% chance of beating this thing. I don't know if that was a reasonable assumption or not, but it sounded good at the time!

So, off I went, got started on the treatment and everything seemed great for a while. Well, ten points for bravado but there was one thing that I should have done before I started and that was to go to the hep C support group and get some good advice on workplace and law related issues. Because three months up the track I wasn't feeling that great anymore [I gradually got more and more run down] and I had some serious issues with work. In hindsight I wish I hadn't told them what was going on. This was just my experience and with some good advice I could have handled it better, and I'm sure that this sort of thing will vary from one employer to the next.

During the first three months I had two bouts of pharyngitis, which resulted in the worst sore throat that I have ever had

twice! A few more months passed and it was getting harder to deal with. I had no energy and was getting quite depressed even though I was put on prophylactic antidepressants. Climbing stairs was a labour and I was out of breath after moderate physical exertion. I developed a strange cough and my skin was getting very itchy. Later I developed some sores on my back and the crown of my head which would not heal. I couldn't think straight, had a poor attention span and felt very dull and lifeless.

Then I remembered in some of the blurb I had read that one of the side effects of the treatment was an acute lowering of red and white blood cells. In fact on one occasion, the pathology lab put a warning on my blood test report saying that I had a dangerously low white blood cell count. The doctor explained that although the count was low, it was OK under the circumstances. I'm sure he was right but it could possibly have explained my susceptibility to infections whilst on treatment. But I'm only guessing.

Now, I'm no doctor or biologist but I do know that hemoglobin, which is contained in red blood cells, carries oxygen and I was breathless and very tired. Could I be becoming anemic and could this be the cause of my lack of energy and breathlessness I wondered? One US hospital website suggested that patients on hepatitis C treatment who suffered these conditions be put on 'Procrit' for anemia and 'Neupogen' for low white cell count but these drugs are apparently not available in Australia. It seemed to me that these conditions were prevalent enough to warrant a mention, so in the absence of this or any other suggestions from my specialist I went and bought some iron tablets and some Vitamin B12 [also containing other B group vitamins to help absorption by the body] hoping that they might do some good.

Well, within three to four days I had improved remarkably!

I had my breath back and those sores started to heal. I could think a bit more clearly and over the next couple of weeks I got even better. I still wasn't fantastic but the treatment was a lot easier to deal with.

I was also applying neat Aloe Vera onto my itchy areas, which seemed to help as well.

It's worth mentioning that during all of this I was smoking which definitely would not have been helping AT ALL! I wish I had given up before I started. I was advised not to try giving up while on treatment as it would add even more stress to an already stressful situation.

During this time I was going to see Sandy Breit from the Haemophilia Foundation of Victoria, at the Alfred hospital once a week for counselling. Sandy helped me enormously and I thank her for that. I was also attending the Hepatitis C Council's support group meetings hosted by Pier Moro. These were also a great help and I thank Pier for his help and guidance. If it were not for the support of these people and some very understanding friends, the whole thing would have been quite difficult to deal with. Although a lot of the time I felt like hiding under a rock, on my good days I still tried to get out and socialise, to see some bands and movies, and continue to do the things that I enjoyed. I figured that this was important if I was to deal with the depressive effects of the treatment. I avoided alcohol but not completely as recommended. I decided that a glass of wine with dinner occasionally wouldn't hurt and that maintaining as near as possible a normal lifestyle was just as important as the treatment itself.

In hindsight I am glad that I spent the time doing some research before I started. It gave me a pretty good idea of what I might experience. And when I eventually did come down with some of the side effects I had some idea of what was happening to me, as well as having some clues about what to do about it.

I also wish I had attended the support group meetings much sooner and not waited until I was already on treatment. I think it's important to be in touch with yourself and be proactive about managing the side effects. Don't be afraid to seek out alternatives such as vitamin supplements etc but do keep your doctor up to speed on what you are doing. I understand that

some herbal remedies can be harmful to a compromised liver so you need to be informed.

Keeping a good lifestyle balance I found to be very important. There is nothing worse than shutting yourself away when you are not feeling that good. Seek out some understanding company and keep talking!

I kept stress levels to a minimum and didn't expect too much of myself. This was a time of healing. This was my twelve months, my time and every one else had to look after themselves for a while. Most importantly, I stuck to the treatment at least 98% of the time. If I hadn't I'm sure it wouldn't have worked and all of this effort would have come to nothing.

Not everyone will experience what I did. There are a whole host of potential side effects but in reality most of them are rare. Only some of them will actually materialise and they will be different from one person to the next. They are manageable.

On a brighter note, now that I have finished my treatment I haven't felt better in years. The twelve months that I took out of my life to do this has ended up being one of the most rewarding things that I have done!

For the first time in quite a while I'm full of beans, bounce and attitude and I'm much happier! I no longer have hep C and am much, much better off for it!

muscles are more likely to get strained or sprained by sudden movement or exertion. Take about 5 to 10 minutes to do this.

Stretching also decreases the risk of muscle injury. Only stretch a muscle to the point of mild discomfort - if it hurts you are pushing too hard - then hold the stretch for around 20 to 30 seconds. Keep breathing normally as you stretch. 5 to 10 minutes.

Proceed with your main activity for 10 to 40 minutes, then finish by cool down for 5 to 10 minutes. This gently lowers heart rate, brings breathing and blood pressure back to normal and removes waste products (such as lactic acid) from muscle tissue thereby helping to reduce post exercise soreness. 5 to 10 minutes.

Remember you will have setbacks that interrupt your routines. Treat them as temporary and get going again as soon as you can. If you are overly fatigued, rest for a day but remember the key to health is regular activity.

Choose an activity that you enjoy and can participate in on a regular basis. Try to vary your program to prevent boredom. Explore your local walking paths, or go cycling. Swimming or water exercise classes in heated indoor pools can add a tropical touch to a Melbourne winter day. Try something you haven't done before - go dancing! Group exercise classes, or exercising with a friend helps you keep to your routine [and commitment]. For relaxation you could rent Tai Chi or Yoga DVDs - then you can have your own class in front of the TV whenever you feel like it.

As well as the formal 'exercise' routine, there are the incidental activities that get you out and about and add to your general fitness and stamina. Do some gardening, walk to the shops [instead of driving] and enjoy other people's gardens. Taking your time and not rushing calms the mind and gives you space to think.

Exercise is important if you are to maintain good physical and mental health. It may be difficult when you feel tired, lethargic and generally unwell, but even a short walk each day can help you cope better with symptoms of hepatitis C. For further information about general exercise have a look at these: www.goforyourlife.vic.gov.au or www.betterhealth.vic.gov.au.

Based on a presentation by Rebecca Good, Physiotherapist, The Alfred Hospital, 2005.

WHAT SHOULD I EAT IF I HAVE HEPATITIS C?

TACKLING DIET MYTHS AND MISCONCEPTIONS

We hear so much in the media about "revolutionary diets" and the latest findings in food science that it is no wonder we get confused about what sort of diet we should be following. This can be especially difficult if you have hepatitis C because there is a lot of conflicting information around diet.

The liver performs many functions that aid digestion, breaking down toxins such as drug and alcohol. It makes important proteins essential to your body such as enzymes for digestion and breaking down fats and sugars and producing blood clotting factors. It also transports proteins and essential nutrients from your diet into different parts of the body where they are needed.

First and foremost, research suggests that people who have hepatitis C should follow a general healthy diet, which includes eating a wide variety of food from each of the food groups. In other words, there is no one food group that you should avoid or consume in copious amounts. Although, because hep C is a condition that affects the liver, it is still important for people with it to watch their intake of alcohol and certain herbs that can worsen liver damage.

FREQUENTLY ASKED QUESTIONS

IF I HAVE HEP C DOES IT MATTER IF I AM OVERWEIGHT ?

Yes. More and more research suggests that excess body fat contributes to liver disease (not to mention the strong link with heart disease). Some research also suggests that even a small weight loss has been found to lead to a significant improvement in Liver Function Tests (LFTs).

So basically if you have the virus you should avoid becoming overweight. However, if you are already overweight and would like to achieve a healthier weight over the long term, a dietitian can help work out the best way for you to go about this (because losing weight too rapidly may also cause liver damage).

CAN I EAT RED MEAT?

There is no evidence to suggest that people

with hep C should avoid red meat. Lean red meat is a great source of protein, iron and zinc. A lack of iron in the diet can make you feel tired and can lead to anaemia (a lack of red blood cells) so aim for at least 2-3 palm size serves of red meat per week.

CAN I EAT DAIRY FOODS?

Dairy foods provide an excellent source of nutrients (especially calcium and protein). For good health (and to keep things like cholesterol under control) it is best to eat reduced fat dairy products. However even moderate amounts of 'full fat' dairy products can be included in a healthy diet. Three serves a day are recommended to ensure you get enough calcium for strong bones and teeth. One serve is equal to:

- one glass of milk or
- one tub of yoghurt or
- one slice of cheese.

WHAT ABOUT FATS?

Whether we have hep C or not, eating too much fat can increase our risk of heart disease, diabetes and becoming overweight. However, fat is still needed in our body to make hormones and for body cells to function properly so it is important to concentrate on choosing the right type of fat rather than cutting out fat altogether.

Consider having polyunsaturated and monounsaturated fats in the form of margarine, canola oil, olive oil, avocado, nuts and seeds, olives (and many more!) because these are "heart healthy" fats. Try to limit saturated fats as these can raise your cholesterol. These include butter, fatty meats (eg. sausages, devon, chicken skin), palm oil (found in many processed foods and commercial cooking) and coconut oil (in coconut milk, coconut cream and coconut milk powder).

OTHER BENEFICIAL FOODS

Eat more fibre and grains. Try changing your bread to whole grain bread, fresh fruit and vegies have lots of fibre. Also nuts, grains and legumes (bean & peas) add some to your next casserole or soup.

Fresh fruit and vegetables. Raw and steamed varieties are the best. Lots of fruits have enzymes to aid in digestion such as cantaloupe, paw paw, grapefruit and lemons this gives your liver a break.

Water and juices. Keep your fluids up. It is important to to drink lots of water.

WHAT SHOULD I DO IF I PREFER NOT TO EAT CERTAIN FOODS?

If you find that you are not eating adequate amounts of a particular food, make sure that you replace it with something similar to ensure you do not miss out on important nutrients. For example:

- Full cream milk with reduced fat milk, soy milk (plain/.avoured/ reduced fat)
- Full cream yoghurt with reduced fat yoghurt, soy yoghurt
- Regular cheese with reduced fat cheese, soy cheese
- Red meat with lean chicken, seafood, fish (including canned tuna & salmon), lean ham, lean pork (see further suggestions below)
- All meats - eating a vegetarian diet with Tofu, tempeh, eggs, beans (eg red kidney beans, chickpeas, baked beans), lentils (dry or canned), reduced fat milk, cheese or yoghurt, nuts, soy 'meats'.
- Fats and oils with margarine, canola oil, olive oil, avocado, nuts and seeds, olives.

SHOULD I GO ON A 'LIVER CLEANSING' DIET?

No. The role of the liver is to naturally 'cleanse' itself. Going on a liver cleansing diet can cut out important vitamins and minerals from your diet and is unnecessary.

CAN I DRINK ALCOHOL?

Opinions about hep C and alcohol intake vary greatly. Some research suggests that people living with hep C should avoid alcohol altogether. This particularly applies to anyone seeking medical treatment for hep C, awaiting a liver transplant or those with cirrhosis of the liver.

Research has found that the risk of developing cirrhosis of the liver appears to be higher for people with hep C if they also are heavy drinkers, however little is known whether there is a 'safe' level of alcohol consumption for people with the disease. A reduction in alcohol intake should be the first step in any attempt to reduce the possible risk of serious liver damage.

The Australian Alcohol Guidelines recommend that people with hep C should consider drinking infrequently and well below the general Australian guidelines (which recommend at least one to two alcohol free days per week). Others recommend abstinence from alcohol for at least the first six months after infection.

CAN I DRINK TEA AND COFFEE AND OTHER CAFFEINE CONTAINING FOOD/DRINKS?

If consumed in moderation there is no evidence to suggest that people with hep C should not consume caffeine-containing drinks. The general daily recommendation for a safe level is less than 600mg and 200mg during pregnancy.

Drink/ food	Caffeine Content
Coffee Percolated	80-350 mg per cup
Coffee Instant	60-100 mg per cup
Tea (Teabag)	8-90 mg per cup
Chocolate Bar	(200g)20-60 mg
Cola Drink	35 mg per 250ml

SHOULD I BE TAKING EXTRA VITAMIN/ MINERAL SUPPLEMENTS?

If you are eating a healthy diet incorporating a wide variety of food from each of the food groups, you should not need additional vitamin and mineral supplements. However if your food intake is poor, you may benefit from taking one general multivitamin/ mineral supplement a day.

ARE THERE ANY ALTERNATIVE HERBAL TREATMENTS I SHOULD BE TAKING?

There is limited research into the effectiveness of complementary and alternative therapies for people with hep C

and the evidence so far is inadequate. Some studies have found that herbal treatments such as silymarin or 'St Mary's Thistle' have shown no harm to people with hep C, however some herbal treatments have actually been shown to damage the liver and can interfere with medication. Below are some commonly used herbs which should be avoided by people with hep C as they may contribute to progression of liver disease:

- Chinese ginseng
- Comfrey
- Germander
- Kombucha
- Pennyroyal oil
- Senna
- Skullcap and valerian combined.

Please note that there are other herbal remedies that can be toxic to the liver. You should always inform both your alternative practitioner and your conventional practitioner know of any medications or alternative treatments you are taking.

SMALL STEPS...

It's important to remember that any healthy changes you take on board are going to make a positive impact, no matter how small they are. So don't worry if you don't have the 'perfect' diet. The most important thing is that you try to make healthier choices each day.

Note: The information in this article is aimed at people with hep C who do not have serious liver damage. If you have a level of liver damage or symptoms that require more specialised dietary advice, your GP or specialist should be able to refer you to a dietitian.

If you have any questions or you would like more information on this or other nutrition issues please contact the Hepatitis C Council of Victoria.

Carole Giudice, Dietitian
The Albion Street Centre. Sydney NSW
 Published in User's News. Autumn 2006.

RECIPE

HAMBURGERS (SERVES 4)

- 4 hamburger rolls
- 500g lean beef mince
- 1 small carrot
- 1 egg, lightly beaten
- 4 large lettuce leaves, halved
- 1 cup fresh breadcrumbs
- 8 slices of beetroot
- 1 tsp dried mixed herbs
- 8 slices of tomato
- Ground black pepper, to taste
- Mustard or tomato sauce, to serve

1. Place the mince, egg, breadcrumbs and herbs into a bowl. Add pepper to taste. Using your hands, mix until well combined, divide into four equal portions and shape each into a patty.
2. Cook patties in a nonstick frying pan or on a BBQ grill plate over medium heat for about five minutes on each side or until cooked through.
3. Toast the cut sides of the hamburger buns either on the hot surface of a pan or grill plate, or under a grill.
4. Peel strips from the carrot with a peeler. Place some lettuce on the bottom half of the buns. Top with meat patties, then the beetroot, tomato, carrot and more lettuce. Add mustard or tomato sauce and put on the tops of the buns.

Serve immediately.

Recipe courtesy of the AIS 'Survival for the Fittest' cookbook.

FROM THE INSIDE

As part of my role as the custodial settings worker here at the Hepatitis C Council of Victoria, I regularly provide education and training on hepatitis C to prison peer educators/supporters across Victoria. Peer educators are sentenced prisoners that are given special training and support on a range of topics, including hepatitis C, with the intention that they then act as a resource for other prisoners.

The Council provides four hours of training to every peer, with regular updates throughout the year, and a manual complete with overheads, notes and a group activity. Peer educators use their training in different ways at different locations - some provide a short information session at 'induction' for new prisoners, other act simply as an informal resource, answering questions one on one.

The great thing about the peer educator/peer supporter program is that not only do we get to spread the hepatitis C prevention message to many more prisoners than one worker alone could hope to access, but the peers themselves get a chance to increase their skills and grow in confidence as they practice their role. We are very committed here at the Council to providing support and up to date, relevant information on hepatitis C to prisoners across Victoria, and we rely very much on the commitment and hard work of the prison peer educators.

One of the peer educators who received training from the Hepatitis C Council recently sent me a letter. [See right.] With his permission we have reprinted parts of it here, to give you an idea of just how hard working and committed our peer educators are. He is writing from the new prison at Lara, Marngoneet, which offers prisoners intensive programs in a therapeutic community environment.

I was very happy to inform our 'friend on the inside' that the Hepatitis C Council of Victoria will definitely be one of the many community organisations with a role to play at Marngoneet. I also wished our friend the best of luck in securing a peer educator position at his new location.

Venetia Brissenden
Policy Development and Education -
Custodial settings.

Greetings from our new prison. I hope you are well and enjoying life out there in freedom. It's too short not to enjoy! It's day 3 for me at our new location and I'm one of the first lot of crims to be processed into this programs prison.

It doesn't seem that long ago that you visited ** Prison [a Victorian prison] and trained us to use the infection control program. I look back at that time and see how far I have come, and how confident and capable at delivering the program. Time and effort bring their own reward and I'm pleased with myself at my own progress as a peer educator from those early days. My time at ** has finished and I have 18 months to possible parole.

I moved prison recently and have been fortunate enough to be in the first intake to Marngoneet, next to Barwon Prison. This prison offers full time educator positions and today I've applied for one of these jobs and, if successful, will be more than happy to have my skills recognised and work in with a team supporting my role.

Having moved from ** I've had to travel light and I need some help with materials for this role. I have held on to my training manual but don't have any other pamphlets on hep C and healthy eating etc. I'd be grateful if you could change my address on file and maybe you could post me some up to date info on hep C treatment as well. Any help would be extremely beneficial to me and the rest of the boys.

Marngoneet will hold 300 crims at full strength. The Governor of this prison is Miss Morrison and she started the Careniche drug and alcohol service in prisons. She is also a practicing psychologist and is very supportive of the peer educator program, which is why I believe our educator positions are held in such high regard. I'm sure if you needed anything from this prison or access to come and meet with educators or staff that you would not find it difficult at all.

Anyway, thank you for the help you have given me and my fellow educators and I look forward to seeing you again at some time in the future.

Your friend on the inside...



RURAL WORKER MISSING IN ACTION?

Contrary to rumour, Rural Education and Community Development worker, Linda Connor, has not been picked up by UFOs on a lonely country road.

After nearly six years with the Council Linda has moved on to BeyondBlue as a National Senior Programs Manager, where she will deal particularly with rural and indigenous initiatives.

Over the years, Linda worked extensively around the state with Jacquie Richmond, St Vincent Hospital's Victorian Hepatitis Educator. Together, they were a formidable hep C tag team, speaking to and supporting regional nurses, midwives and GPs.

For nine months, Linda was based in Geelong, at the Barwon Health Drug Treatment service. This time gave her the opportunity for extensive partnership building in the Barwon south west region. This was to prove invaluable when the Council was able to access these many networks for other projects such as the Workforce Development Forums.

More recently, her work on building partnerships with VACCHO culminated in a Memorandum of Understanding between the two organisations. This influenced the decision for a specific Indigenous position on the Council's own Board of Management.

Linda spoke out strongly for human rights, both here and overseas, and shared her skills, knowledge and experience with generosity and humour.

ORRABEST LINDA!

Education Resource Centre at the Alfred

HELPING YOU TO TAKE CONTROL

To support you to 'take control' The Alfred offers a number of services.

HEPATITIS CLINIC

Hepatitis Clinic offers a wide range of services, such as:

- Conventional and alternative therapies
- Advice and support by medical and nursing staff
- Monitoring and follow-up of your Hepatitis
- Counselling and mental health
- Referrals to other departments and community services.

You will need a referral from your GP and a copy of any recent blood results or relevant investigations. The clinic operates at Prahran and Cheltenham. Appointments are made by phoning the department on 9276 2223.

The Hepatitis Clinic is staffed by doctors and nurses who are specialised in the area of liver disease, such as hepatitis. They are able to give advice as to the level of the disease, treatment options, alternative therapies and answer questions that you may have.

HEPATITIS C COUNSELLOR

Sandy Breit is the Hepatitis C Counsellor based at The Alfred. She is employed by the Haemophilia Foundation and works with anyone who has hep C. She sees people individually, with partners or other family members and is able to provide counselling, information and support. A range of issues can be addressed including coping with a diagnosis, relationship issues, family issues, disclosure, decisions related to treatment, coping with side effects of treatment, discrimination etc. Sandy can also put you in touch with appropriate services and support groups. Sandy works Tuesday to Friday from about 9am - 5pm. If she is not in her office, please leave a message and she will ring back. To find out her contact details, you can ring either the HIV Hepatitis STI, Education & Resource Centre (9276 6993) or the Hepatitis C Council (9380 4644).

EDUCATION & RESOURCE CENTRE

Education & Resource Centre provides access to current accurate information on HIV, Hepatitis and STIs. We have a broad range of materials including DVDs, books, journals, newsletters, pamphlets and fact sheets. You are invited to visit the centre where we have a health educator and librarian to assist you to learn more about these infections. We are also able to offer support to other health care workers to increase their knowledge in this area.

You can also visit us online at www.accessinfo.org.au where you will find many resources and useful links.

CAN I BORROW RESOURCES?

We have a range of membership services available to individuals and organisations with a long term interest in borrowing from the centre. As part of this service we offer photocopying of reference information.

[New books on Hepatitis C are available at Education & Resource Centre.](#)

BOOKS

Hepatitis C Think Tank: Expanding Access to Hepatitis C Treatment in the Community. Australasian Society for HIV Medicine (ASHM), Darlinghurst, NSW, 2006.

This is a report of the Hepatitis 'think tank', a meeting held adjacent to the 5th

Australasian Viral Hepatitis Conference in February this year. Organised by ASHM, it was held to explore ways of expanding access to hepatitis C management in the community - through reviewing existing strategies being implemented in various jurisdictions and processes in place to deal with care of other chronic conditions.

Available online at:

<http://www.ashm.org.au/uploads/File/hepc-think-tank.pdf>

Talking Together: Contemporary Issues in Aboriginal and Torres Strait Islander Health: HIV, Hepatitis and Sexual Health. Australasian Society for HIV Medicine (ASHM), Darlinghurst, NSW, 2005

This distance learning package was produced by ASHM to provide up-to-date information and to discuss the importance of delivering this information about sensitive topics in culturally appropriate ways to diverse indigenous communities. The kit contains a user guide, video and a copy of the ASHM publication 'HIV/Viral Hepatitis: A Guide for Primary Care'. Print materials from the package can be downloaded from <http://www.ashm.org.au/talking-contents>

Australian NSP Survey National Data Report 2000-2004.

Report prepared by H. Thein, B. White, S. Shourie & L. Maher, National Centre in HIV Epidemiology and Clinical Research, University of NSW, Sydney, NSW, 2005

The report details the prevalence of HIV, HCV and injecting and sexual behaviour among injecting drug users at Needle and Syringe Programs. A copy of this document can be found at: http://web.med.unsw.edu.au/nchecr/Downloads/NSP_Survey_complete_educated.pdf

We also have many new and recent journal articles both research literature and plain language available on Hepatitis, HIV and STIs for you to browse.

Education & Resource Centre
Fairfield House
The Alfred
Moubray Street, Prahran, 3181

Telephone: 03 9276 6993
Fax: 03 9533 6324
Email: access@alfred.org.au
www.accessinfo.org.au

"I started calling the Helpline, and that was great. It really helped me to be a bit easier on myself and not feel like such a hypochondriac.

The people I spoke to knew what I was talking about and were sympathetic, they always had time to listen."

Kathy

Helpline is here to help you

The Hepatitis Line provides anonymous counselling, information and referral to the general community. The hepatitis C virus does not discriminate on either a physical, social or geographical level so consequently there is no typical profile of a caller to the Hepatitis Line. We get to hear from a really diverse range of people. These callers are either living with the virus or are family and friends and affected in some way.

The help line allows callers the opportunity to 'self manage' their own health regime.

In particular people who are either on treatment or contemplating treatment utilise our service in many ways. It's been our experience that once people start on a course of treatment many of them phone us on a regular basis to stay connected with people who are aware and familiar with the difficulties the treatment regime often entails.

This has been very evident in the many callers who often use the service on a regular basis to 'off load' their concerns and fears about living with a chronic illness.

Our experience on the phone line is that once people learn more about the way that the hepatitis C virus affects them personally they feel more empowered to instigate ways to manage their hepatitis C.

We here at the Hepatitis line invite people to use the service as part of their overall strategy in coping with this virus.

Heather Morgan

Education and Development Coordinator

CONTACT THE HEPATITIS LINE

Are you worried about hepatitis C?
Do you have questions or would like to talk things through?

Call us: 1800 800 241
for information and confidential,
anonymous telephone counselling.

Hours:
Monday to Friday: 9am -10pm
Saturday and Sunday:
9-11am then 6pm to 8pm.

ONLINE SUPPORT GROUP FOR PEOPLE AFFECTED BY HEPATITIS C

[HTTP://HEPCAUSTRALASIA.ORG](http://HEPCAUSTRALASIA.ORG)

is a community-based internet discussion forum which aims to empower people affected by hepatitis C and provides a place to share ideas, opinions, support, tears and laughter.

An initiative of the NSW Hep C Council, the forum is endorsed and supported by the various Hepatitis C Councils and organisations in Australia or New Zealand.

The Forum has some excellent aims and objectives. These include:

- We seek to support each other emotionally through the difficulties and challenges associated with hepatitis C. We are committed to expanding our knowledge and awareness of hepatitis C through sharing of views, comment and experiences.
- We respect the diversity and dignity of every person's individual choices, beliefs, stories, problems, and successes.
- We do not promote any mode of treatment. We recognise that different treatments are appropriate for the different needs, wishes, and situations of different people.
- We are Australasian-based and our primary focus is on those people affected by hepatitis C and living in Australia and New Zealand. People from other countries are welcome and enable valuable linkages to what is happening with hepatitis C in other cultures.

"When I was confused or couldn't talk about stuff to my friends, I would call the help line. It was an opportunity to have some questions answered, or at least discussed openly, in an informal manner." Dee

THE HEALTHY LIVER CLINIC

Got Hep C? Want treatment?

The Healthy Liver Clinic at Turning Point can clinically assess your liver, monitor your hep C, provide treatment for Hep C and provide methadone or buprenorphine treatment - all onsite at Turning Point

Drop in and ask for
Dr Nick Walsh or Jenny Kelsall.

9am-5pm, Monday to Friday
at 54-62 Gertrude Street,
Fitzroy Victoria 3065.

Telephone: 03 8413 8413
Email: nickw@turningpoint.org.au

TURNING POINT ALCOHOL & DRUG CENTRE

WWW.TURNINGPOINT.ORG.AU

SHARPS HEP C SUPPORT GROUP

Come and meet us at the support group.
We have guest speakers and Mellisa's famous home-made fruit juices.

First friday of each month
7 July, 4 August, 1 September
From 11am to noon

Contact: 9781 1622
Held at SHARPS
35-39 Ross Smith Avenue, Frankston

WANT YOUR OWN COPY OF GL FOR FREE!

Keep on top of hepatitis C issues. Individual membership is FREE at the Council - contact Gen on 03 9380 4644 or 1800 703 003 or email: info@hepcvic.org.au

WARRNAMBOOL BBV CLINIC

A comprehensive medical service for people affected by blood borne viruses in South West Victoria

We are specialist providers of health care and other support relating to blood borne viruses.

Enquires or appointments contact:

The WRAD Centre
26 Fairy Street, Warrnambool
or telephone 03 5560 3222

SUPPORT GROUP BREAKING THE CHAINS

HIV | HEP C SUPPORT & EDUCATION
GROUP - WARRNAMBOOL

Breaking The Chains is a Warrnambool and district group of HIV or hepatitis C positive people, their friends, families and supporters. We meet on the 2nd and 4th Thursdays of every month.

For further information or meeting details, please contact Jeffrey on
9486 5972 or **0401 240 167**
or email: breakingthechains@hotmail.com

NEED HELP WITH HEPATITIS C IN GIPPSLAND/LATROBE VALLEY?

Dr Amir Safe, MD FRCP FRACP, Consulting Gastroenterologist is providing hepatitis management services from the Latrobe Regional Hospital in Traralgon.
Telephone: 5173 8111

ST VINCENT'S HOSPITAL TREATMENT SUPPORT GROUP

For anyone on current treatment and/or interest in the new changes to hepatitis C treatment, this Group run 2 sessions a year.

2006 Session 2 is halfway through. If you like to know about the group and the dates for 2007 contact Kate on 9288 2259 or email katherine.mellor@svhm.org.au

NEW ORAL DRUG TRIAL FOR HEP C

The Centre for Clinical Studies is conducting a clinical trial to investigate the use of a new antiviral oral drug for the treatment of hepatitis C.

TO BE CONSIDERED ELIGIBLE FOR THE STUDY YOU MUST BE:

Male; infected with HCV Genotype 1; had a Liver Biopsy within the last 3 years or be willing to undergo a liver biopsy; have a viral load above 100,000 and never had any previous treatment for your Hepatitis C

You will be financially reimbursed for your time. After completion of the study, if determined medically necessary, therapy to treat your hepatitis C will be funded, if it is not already covered by any government sponsored Health Plan.

For further information contact the Centre for Clinical Studies at the Alfred Hospital on 9207 1900 or email b.scott@centreforclinicalstudies.com

diary:

28-29 SEPTEMBER 2006 ANEX AUSTRALIAN AMPHETAMINE CONFERENCE

Darling Harbour, Sydney, NSW. For more details go to: www.amphetamines.org.au.

1 - 6 OCTOBER 2006 HEPATITIS C AWARENESS WEEK

National Hepatitis C Awareness Week is on again. Get your community involved! For more information on how to be part of the action contact Heather at the Hepatitis C Council of Victoria on 03 9385 9107 or visit www.hepcvic.org.au.

11 - 14 OCTOBER 2006 18TH ANNUAL ASHM CONFERENCE MELBOURNE

In conjunction with the 3rd ACH² Workshop (Australian Centre for HIV and Hepatitis Virology Research). For more information call 02 8204 0770, email conferenceinfo@ashm.org.au or go to the web site at www.ashm.org.au/conference

18 NOVEMBER 2006 14TH NATIONAL SYMPOSIUM ON HEPATITIS B AND C ST VINCENT'S HOSPITAL, MELBOURNE

For more information contact Eleanor at email: eleanor.belot@svhm.org.au.

7-10 MARCH 2007 9TH NATIONAL RURAL HEALTH CONFERENCE - ALBURY NSW

For more information contact the National Rural health Alliance on 02 6285 4660 or go to the conference web site: <http://9thnrhc.ruralhealth.org.au>

"We all have different emotional, physical, and spiritual needs.

Our mind, body and spirit are connected and affect each other. In our daily lives, achieving a balance amongst the ups and downs, pressures, stresses and problems is important.

Taking care of our whole selves helps to achieve this balance."

'Healthy mind. Healthy body' booklet.
Produced by The Alfred Hospital, Melbourne.

LIVER CLINICS

Albury/Wodonga

Telephone: 02 6024 5255

Alfred Hospital

Telephone: 9276 2223

- **Bayside Hepatitis Clinic**

Telephone: 9276 2223

Austin/Repatriation Medical Centre

Telephone: 9496 2787

Ballarat Liver Clinic

Telephone: 5331 9210

Box Hill Hospital

Telephone: 9895 3120

Geelong Liver Clinic

Telephone: 5226 7111

Gippsland - Latrobe Regional Hospital

Telephone: 5173 8111

Maroondah Hospital

Telephone: 9871 3371

Monash Medical Centre

Telephone: 9594 3088

- **Cranbourne Liver Clinic**

Telephone: 9594 3088

- **Springvale Liver Clinic**

Telephone: 9594 3088

Northern Hospital Liver Clinic (Epping)

Telephone: 9219 8335

Peninsula Liver Clinic

Telephone: 9781 4434

Royal Melbourne Hospital

Telephone: 9342 7212

St Vincent's Hospital

Liver Clinic: 9288 2898

Hepatitis Clinic: 9288 3580

- **Bairnsdale Clinic**

Telephone: 9288 3580

- **Knox Hepatitis and Liver Clinic**

Telephone: 9210 7300

- **St Kilda Hepatitis Clinic**

Telephone: 9534 0531

- **Warragul Clinic**

Telephone: 9288 3580

- **Werribee Hepatitis Clinic**

Telephone: 9216 8633

Turning Point Healthy Liver Clinic

Telephone: 8413 8413

Warrnambool BBV Clinic

Telephone: 5560 3222

Western Hospital

Telephone: 8345 6490

SERVICES DIRECTORY

METRO AND/OR STATEWIDE

Education & Resource Centre at the Alfred

Telephone: 03) 9276 6993

Fax: 03) 9533 6324

Email: access@alfred.org.au

Web: www.accessinfo.org.au

ANEX

(Association of Needle Exchanges)

Telephone: 03) 9417 4838

Email: info@anex.org.au

Australian Complementary Health Association

Telephone: 03) 9650 5327

Web: www.diversity.org.au

Body Art

Piercing Urge, Prahran

Telephone: 03) 9530 2244

Web: www.thepiercingurge.com.au

Chinese Herbalist

Lisa McPherson

Telephone: 03) 9687 2747 (Footscray)

Chinese Medicine Practitioner

Catherine Riva

Telephone: 03) 9844 0459 (Warrandyte)

Telephone: 03) 9596 2468 (Brighton)

Complementary Medicine

Salus Complementary Medicine Specialists

Telephone: 9500 8870 (Armadale)

Counselling

Positive Counselling HIV/Hep C Inc.

Telephone: 9530 2311

www.positivecounselling.org.au

Sandy Breit

Hepatitis C Counsellor

Telephone: 9276 3021

Dentist

Martin Hall (Richmond)

Telephone: 03) 9420 1302

Direct Line

Drug & alcohol counselling and NSP info

Free call: 1800 888 236

Employment

Westgate Community Initiatives Group

(formerly Options Enterprises), South Yarra

Telephone: 03) 9824 2330

Equal Opportunity Commission Victoria

Telephone: 03) 9281 7111

Toll Free: 1800 134 142

Email: eoc@vicnet.net.au

Web: www.eoc.vic.gov.au

Haemophilia Foundation Victoria

Telephone: 03) 9555 7595

Hepatitis Line (telephone counselling)

Freecall: 1800 800 241

Vietnamese hep C Info Line: 1800 456 007

Khmer hep C Info Line: 1800 810 277

Healthworks

Treatment GP: Dr Fran Bramwell

Telephone: 03) 9362 8100

Infoshare

Self Help Addition Resource Centre,

Glenhuntly

Telephone: 03) 9572 1151

Email: info@share.org.au

Medical

Barkly Street Clinic, St Kilda

Telephone: 03) 9534 0531

Melbourne Sexual Health Centre

Telephone: 03) 9347 0244

Free call: 1800 032 017

Multicultural Health & Support Service

(HIV, Hepatitis C & STIs)

Telephone: 03 9420 1339

Go to: www.nrhc.com.au

Multilingual Hepatitis C Resources

This website has over 400 pages of hep C and HIV information in 18 languages.

Go to: www.multiculturalhivhepc.net.au

Narcotics Anonymous - Victoria

Statewide service and meeting most areas.

Telephone: 03 9525 2833

Geelong: 03 5221 0803

Gippsland: 0405 378 513

Naturopaths

Jenny Adams. Telephone: 03) 9489 7955

George Campbell. Telephone: 03) 9646 5455

Jane Daley. Telephone: 03) 9500 8870

Ondine Spitzer. Telephone: 03) 9372 0499

Gill Stannard. Telephone: 03) 9650 3419

Nawala Willumbong Co op Limited

Indigenous drug & alcohol service (St Kilda)

Telephone: 03) 9510 3233

Email: info@ngwala.org

Office of the Health Services Commissioner

Telephone: 03) 8601 5222

Complaints: 03) 8601 5200

Freecall: 1800 136 066

Royal District Nursing Service

Telephone: 03) 9536 5222

Email: getinfo@rdns.com.au

Solicitor

Mary Simpson
Slater & Gordon
Telephone: 03) 9600 0290

Victorian Aboriginal Community Controlled Health Organisation

Telephone: 03 9419 3350

Victorian Aboriginal Health Service

Telephone: 03) 9419 3000
Fax: 03) 9417 3897

Victorian Hepatitis C Educator

Jacqui Richmond
Telephone: 03) 9288 3586
Fax: 03) 9288 3590
Email: richmoj@svhm.org.au

VIVAIDS

Telephone: 03) 9329 1501
Country calls: 1800 443 844
Email: vivaid@vivaid.org.au

RURAL AND REGIONAL

These contacts are able to provide information about local hepatitis C related services as well as active support groups (SG).

Ballarat Community Health

Contact: Marg Strangl
Telephone: 03) 5333 1635

Barwon - Surf Coast Health Service

Telephone: 03) 5261 1100

Barwon Health Drug & Alcohol Services

Telephone: 03) 5273 4000

Bendigo Hep C Information & Support

Contact: Adam Wright
Telephone: 03) 5443 8355
Email: can@can.org.au

Bendigo Health Care Group

Contact: Jane Hellsten or Pauline Woodburn
Telephone: 03) 5454 8416

Camperdown Hepatitis C Support worker

Contact: Jo Sloetjes
Telephone: 03) 5593 3415
Email: camperdown.resource@sudp-vic.org.au

Corio Community Health

Contact: Rochelle Hamilton
Telephone: 03) 5273 2200

Horsham - Wimmera Hep C Support Group

Contact: Jan Spencer
Telephone: 03) 5381 9378

Latrobe - Mobile Drug Safety Worker

Helen Warner
Mobile: 0438 128 919

Mildura - Sunraysia Community Health

Anne Watts
Telephone: 03) 5023 7511

Moe Community Health Centre (SG)

Contact: Catherine Ashford
Telephone: 03) 5127 5555

Portland - Glenelg Southern Grampians Drug Treatment Service

Contact: Bev McIlroy
Telephone: 03) 5521 0350

Shepparton Community Health

Contact: Merri Blair
Telephone: 03) 5823 3200

Wangaratta - Ovens and King CHC

Contact: Diane Hourigan
Telephone: 03) 5723 2000

Warrnambool - Western Region Alcohol and Drug Centre

Telephone: 03) 5560 3222

Wimmera (East) Region

(Birchip, Wycheproof, St Arnaud)
Phil Blackwood (Naturopath/Psychologist)
Mobile telephone: 0403 625 526

Wodonga Community Health

Contact: Jenny Horan/Anita
Telephone: 02) 6022 8888

Yarra Valley Community Health Service

Contact: Debra Cahill
Telephone: 1300 130 381

Yarrowonga Community Health

Contact: Cherie McQualter Whyte
Telephone: 03) 5744 1324

WEB FORUMS

The Australian Hepatitis Council is now running its web forum for professionals in the hepatitis C sector. Check it out at: www.hepatitisaustralia.com/forum/publicaccess/

SUPPORT ON THE INTERNET

If you can't get to a support group, you can always go to the NSW community forum at: <http://hepatitisc.communityzero.com>

INFORMATION & SUPPORT GROUPS

Learning about your rights, dealing with discrimination and discussing the issues that impact on you - all these things can happen in the safe environment of a Support Group.

METRO

HEPATITIS C COUNCIL OF VICTORIA:

Contact: Pier Moro 9380 4644

Brunswick Drop In & Information Sessions - open to family, partners and friends. ALL WELCOME.

When: Second Sunday of every month

Time: 2 - 4pm

Next: 10 Sept; 8 Oct; 12 November.

*Special christmas session 10 Dec.

Venue: Hepatitis C Council Offices.

5/200 Sydney Rd, Brunswick

ST VINCENT'S HOSPITAL:

Contact: Kate Mellor on 9288 2259

For anyone with hep C interested in the new changes to treatment. For anyone on treatment, or completed treatment, or interested in peer support or side effects management.

This group runs fortnightly for 12 weeks twice a year.

When: **Session 2:** continues 14 & 28 Sept and 12 October

Time: 5 - 6.30pm

Venue: 38 Fitzroy Street, Fitzroy.

For further information contact Kate Mellor on the above number or email katherine.mellor@svhm.org.au

SHARPS:

Contact: 9781 1622

Come and meet us at the support group. We have guest speakers, and Mellisa's famous home-made fruit juices.

When: First Friday of each month

1 September, 6 October, 3 November

Time: 11am to noon

Venue: SHARPS

35-39 Ross Smith Avenue, Frankston

RURAL

WARRNAMBOOL:

Contact Jeffrey on 0401 240 167 or 9486 5972.

YARRA VALLEY - HEALESVILLE:

This support group has just started - come and join us. Contact Debra on 1300 130 381 for more information.

AN INVITATION TO JOIN US

FOR THE HEPATITIS C COUNCIL OF VICTORIA TO BE TRULY REPRESENTATIVE OF THE HEPATITIS C COMMUNITY, A STRONG MEMBERSHIP OF PEOPLE AFFECTED BY THE VIRUS IS ESSENTIAL.

There are 3 types of membership. Each includes all resources distributed by the Council. By becoming a member you show your support for the peak organisation working for people with hepatitis C in Victoria.

- 1 Individual: Entitles you to one copy of Good Liver per quarter and one vote at the AGM.
- 3 Healthcare Professional: As for individual - but includes 3 copies of Good Liver.
- 4 Organisation: As for individual - but includes 5 copies of Good Liver.

COMPLETE THE FORM BELOW AND MAIL TO THE COUNCIL.

TAX INVOICE ABN 48 656 812 701
Please ensure you retain a copy for tax purposes

Are you a new or renewing member?

Title Name

Occupation

Organisation (if applicable)

Mailing Address

Postcode

Local Government Area (ie Banyule, Stonnington, Casey:)

Telephone

Fax

Email

Tick one membership box. (Includes GST)

- | | |
|----------------|-------------------------------|
| Individuals | <input type="checkbox"/> \$0 |
| Professional | <input type="checkbox"/> \$33 |
| Organisational | <input type="checkbox"/> \$77 |

Donations are gratefully received by the Council \$

(All donations over \$2 are tax deductible)

Total \$

Are you interested in becoming a volunteer with the Council?

HAVE YOU GOT A STORY TO TELL?

The most read section of Good Liver is the "My Story" section.

Most people say they like to read about the good, the bad, and the normal of other peoples' experiences with hepatitis C.

Any issues, any experiences around hepatitis C can make good reading and help others make choices about their own situations.

We'd love to hear your story.