

## Hemodialysis Patients: a High Risk Group for Hepatitis C

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To The Editor: We commend Alashek et al for their excellent article [1]. However, the authors did not clarify why a very important high risk group was left out of their study, that of hemodialysis (HD) patients.

Hepatitis C Virus (HCV) infection has been shown to be more prevalent among HD patients in developing countries. Hepatitis C prominently increases the burden of disease in the HD population. Furthermore, the longer patients are on HD, the more susceptible they are to HCV acquisition [2].

More importantly in Libya, HD patients seem to have a higher prevalence of the disease compared to other more developed regions.

Research from Libya on this issue although scant, is available, as evident by a relatively recent publication on the matter, a study by Daw et al, conducted in Tripoli from 1999 to 2001 [3]. The study showed a 20.5% prevalence of HCV among HD patients, which is of similar prevalence to neighbouring Tunisia, and seems to be better than some of the gulf countries, where a higher sero-prevalence rate seems to exist within this patient group [2].

This percentage is still unacceptable, as emphasized when compared to the CDC's data which states that the prevalence of hepatitis C in this population averages 10%, any thing above clearly outlines flaws in the HD service [4].

Health care systems that employ strict adherence to universal preventive measures during HD have a low prevalence of HCV among their patients; an example of this is that the UK has a 4% prevalence of HCV among HD patients [2].

Hemodialysis should not be a one-way street to acquiring a blood borne viral infection and unless clinical practice is changed to avoid infection risk, the overall disease burden for this group will only increase to their detriment.

The current sero-prevalence status of HD patients in Libya needs to be studied and updated. We hope Alashek et al continue in their excellent work, and we recommend that the HD patient group in Libya is studied further, and any particular flaws in the provision of their care is identified and rectified.

### References

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