The prevalence of hepatitis C (HCV) in the U.S. varies depending on race or ethnicity. Looking at acute hepatitis C infections, American Indian/Alaska Natives have the highest incidence by a significant margin. Blacks used to have the next highest incidence of acute infections, but widespread opioid use has pushed whites into the second-place spot. The rate of acute HCV infections among Latinos is roughly the same as that of Blacks. Asian-Pacific Islanders have the lowest incidence of acute hep C.

The hepatitis C death rate in the U.S. also varies by race and ethnicity. American Indian/Alaska Natives have significantly higher hepatitis C-related deaths than all other groups. Blacks have the next highest-ranking HCV death rate. Latinos occupy the third spot in HCV-related deaths. Asian-Pacific Islanders have the lowest incidence of death from hep C. The reason for the higher death rates in nonwhite groups is probably due to limited access to good health care rather than actual racial or ethnic differences.

In the past when hepatitis C treatment relied on interferon, African Americans were less likely to respond to treatment than Caucasians were. This is because the success of interferon treatment was affected by differences that each of us carries in our individual genetic structures. Data on response rates using the newer HCV direct-acting antivirals show varying results. One study reported high cure rates for everyone, regardless of race or ethnicity. However, a 2018 study conducted at a Veterans Health Administration facility in Los Angeles found that African-Americans had 57 percent lower odds for being cured compared to whites. The researchers don’t know if this differences are due to drug metabolism or other factors.