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Doctor and Patient

# From Needle Stick to Cure for Hepatitis

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As doctors-in-training in the early 1990s, my friends and I became obsessed with the question of what we would do if we were pricked with an infected needle at work. We all had witnessed the inexorable, often painful march toward death of patients with hepatitis C and AIDS. We imagined the despair we would feel in that situation: the dashed hopes, the lost years of schooling and training. Many of us saw ourselves walking out of the hospital and not looking back. We couldn't imagine throwing ourselves back into the fray.

We had not met Dr. Douglas Dieterich.

In 1977, while working in the hospital as a third-year medical student, Dr. Dieterich was accidentally stuck with a needle contaminated with hepatitis. And for the next 20 years, he struggled with regular and debilitating episodes of exhaustion, jaundice and high fevers. But he did not quit medicine. Instead Dr. Dieterich continued to train and then to practice, eventually becoming a national expert in hepatitis C, the very disease he had acquired.

Clinical trials of drugs to combat the disease, some led by Dr. Dieterich, have resulted in a better understanding of the virus that causes hepatitis C and, more recently, to cures. About 10 years ago, Dr. Dieterich himself was finally cured with one of the drug combinations that he had helped to study.

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Dr. Pauline Chen on medical care.

Now a professor of medicine at Mount Sinai Medical Center in New York, Dr. Dieterich said recently: “In the dark days of the 1980s, I remember being really sick and thinking, ‘Damn it. I hope I can help someone else before this virus gets me.’ Now it looks like I can. I think it’s the beginning of the end of hepatitis C; and that is one of the happiest statements I can make.”

I spoke to Dr. Dieterich about his experiences as a doctor and patient and about the outlook for patients with hepatitis C.

Q.

What went through your mind when you got stuck?

A.

I knew it was trouble because the needle had been used on a patient who was a drug user with all the worst risk factors. But I put it out of my head because I had other things on my mind. I had to go to my grandmother’s funeral that weekend.

Six weeks later, I became completely exhausted. When I saw the Coca-Cola-colored urine, I thought, “Oh, man, this is not good.” I got tested and was told I had non-A, non-B hepatitis. That was all we knew at the time; we didn’t know about hepatitis C. The doctor told me there was nothing he could do and showed me an article about how soldiers with hepatitis A could still work. But I was so sick I couldn’t work and ended up in bed all summer.

When I think back on that summer, I now realize how bad a shape I was in.

Q.

Did you ever worry about dying?

A.

Death definitely did not escape my mind. But I also started getting interested in liver disease. I was angry that there was nothing to do, no treatment. We didn’t even have any idea of what virus caused my hepatitis.

I ended up choosing to do an internship at Bellevue Hospital. I'd get sick every two months with jaundice and fevers to 102. I also got a liver biopsy every year; and those results revealed that my liver was just getting worse. Still, there was nothing to do for my disease other than take prednisone. When the first liver transplants started being done in the 1980s, I thought that was where I was going to end up.

Q.

How did other people treat you?

A.

Once my doctors sent a medical student to draw my blood. He was dressed in one of those space suits for Level 4 isolation, and his hands were shaking because he was so terrified. He couldn't draw my blood, so I told him to put the tourniquet around my arm, and I ended up drawing my own blood for him.

I identified with patients who were discriminated against because of their disease. When the first AIDS patients came to hospitals, there weren't many people willing to take care of them. Doctors were afraid that they might catch it. I didn't care about catching anything, because what the heck, I already had one chronic disease that was going to kill me, and if I couldn't do something for myself, I had to do something for other people.

I ended up taking care of a lot of H.I.V. patients, and I also never kept it a secret that I was sick. I don't think my colleagues treated me differently because of my sickness; but I do think there was discrimination because of whom I was taking care of, not because of my own disease.

Q.

How are you doing now?

A.

I'm cured now. It's been like a dream come true because for so long we couldn't do anything about this disease. Now we are curing people of hepatitis C,

and nothing makes me happier. Two drugs have already been approved, and there are 50 new drugs coming down the pipeline.

Q.

What do you tell your patients now?

A.

I tell them that if you are going to have hepatitis C, now is the time, because there is one new drug after another. Now we can cure patients 80 percent of the time. I have a list of almost 200 patients whom we have cured. I have also treated about 25 medical students and doctors-in-training who have had needle sticks and gotten hepatitis C. That is really gratifying; I don't want anyone else to go through what I went through.

The tragedy of the hepatitis C epidemic is that more than half of the people don't even know they have the virus. And half of those who know they have hepatitis C haven't even discussed getting treated. There are 50,000 Americans who are going to die from hepatitis C, and that death rate will quadruple unless we do something and do it early in the disease course when it's easier to cure.

Now that we have the tools, we have to start kicking some viral butt!

Q.

Did you always want to be a doctor?

A.

I always did. In fact, I didn't get into medical school the first time around.

Sometimes I think that somebody with half a brain would have chosen work that wasn't so demanding. But I guess that's not me. I was hell-bent on getting back at this virus.

I used to talk a lot about adversity with one of my best friends who was diagnosed with Hodgkin's disease and died at the age of 38. He and I used to agree that with our illnesses we had faced a lot of adversity and that we had had a lot of

failures. But we also agreed that what made the difference in life was not how well you succeeded; it was how well you failed, how many times you picked yourself up and put yourself back in the fray.

I'd like to think that I failed well.

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