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HTLV-1 virus

What is HTLV-1?

Human T-Lymphotropic Virus Type 1 (HTLV-1) is a retrovirus that infects human white blood cells. It can cause diseases of the nervous system or a type of leukemia.

Is this a new disease?

No. This disease was first described in 1980 and has been identified throughout the world.

HTLV-1 is more common in Japan and other countries in the Western Pacific region, the Caribbean, West Africa, the Middle East and South America. An estimated 10 to 20 million people are infected worldwide. It is rare in Canada, but cases have been found among First Nations communities in British Columbia and Nunavut.

How can I tell if I have HTLV-1?

Most people who have the virus will not get symptoms or develop any health problems.

About 5 to 10 percent of people who get infected with HTLV-1 will eventually get sick with an HTLV-1-associated illness sometime in their lifetime. Illness does not usually occur until several decades after being infected.

People who get sick may develop a rare blood cancer called adult T-cell leukemia/lymphoma (ATLL) or have inflammation of the spinal cord that causes weakness of the legs, lower back pain, loss of bladder control or constipation.

To confirm that you have HTLV-1, your health care provider may send you for a blood test.

How is the virus spread?

HTLV-1 is spread from an infected person to other people by:

- Sharing needles, syringes or other equipment used for injecting drugs
- Sexual contact (vaginal, anal and oral). Evidence shows that the virus spreads more easily from males to females than from females to males
- Giving birth and breastfeeding or chestfeeding. About one quarter of mothers who are infected with HTLV-1 may transmit the virus to their babies at birth or through breastfeeding or chestfeeding, especially if breastfeeding or chestfeeding for 6 months or more
- Getting an organ transplant

Should I breastfeed or chestfeed if I have HTLV-1?

If you are infected with HTLV-1, you should not breastfeed or chestfeed. For more information, visit HealthLinkBC File #70 Breastfeeding or chestfeeding.

How can I protect myself against infection from HTLV-1?

You can protect yourself from being infected with HTLV-1 by:

- Never sharing needles, syringes or other drug injection equipment. For information about harm reduction supplies, needle distribution and disposal, visit www.vch.ca/en/service/harm-reduction-supplies-needle-distribution-sites

- Using a condom every time you have vaginal, anal or oral sex

HTLV-1 is not spread through contact such as kissing, using the toilet or preparing food. A person may get HTLV-1 through shared drug injection equipment, unprotected sex (vaginal, anal or oral), or breastfeeding or chestfeeding.

Is there any treatment for HTLV-1 infection?

There is currently no treatment that will get rid of the virus once you are infected. However, only about 5 percent of those who are infected develop any illness as a result of their infection. For those who do develop illnesses such as ATLL, there are some treatments available, such as corticosteroids, immune modulating drugs and chemotherapy.

Can I get HTLV-1 from blood transfusions?

Canadian Blood Services has been screening all blood donations for HTLV-1 since April 1990 and transmission of HTLV-1 by transfusion has been virtually eliminated in Canada.

Should I get tested?

No, unless you have an HTLV-1-associated illness for which your health care provider thinks testing is needed, or you have been in contact with a known case.

BC Centre for Disease Control
Provincial Health Services Authority