Albumin and Liver Stiffness Signal Risk of Liver Cancer After Hep C Cure

So found a study of more than 1,500 people treated for hep C, including almost 600 people with compensated advanced chronic liver disease.

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To identify who among those receiving direct-acting antiviral (DAA) treatment for hepatitis C virus (HCV) is at elevated risk for liver cancer, look to albumin and liver stiffness levels during the period following treatment, Healio reports.

That's according to a new study led by Mònica Pons, MD, of the Vall d'Hebron Research Institute in Barcelona, and published in the Journal of Hepatology.

The study analyzed data on 1,563 people who received DAA treatment for HCV, 572 of whom had compensated advanced chronic liver disease. A total of 97.1% achieved a sustained virologic response 12 weeks after completing therapy (SVR12), considered a cure.

During a median follow-up of 2.8 years, 32 (5.6%) of the cohort members developed a liver-related health event. The most frequent such event was hepatocellular carcinoma (HCC, the most common form of liver cancer), diagnosed in 25 people, for a diagnosis rate of 1.5 cases per cumulative years of follow-up. The median time between the end of DAA treatment and the diagnosis liver cancer among those who received such a diagnosis was 1 year.

After adjusting the data to account for various differences among the cohort members, the study authors found that having an albumin level below 4.4 grams per deciliter when starting DAA treatment was associated with a 71% lower risk of liver cancer. Additionally, having an albumin level below 4.4 g/dl during post-DAA follow-up was associated with a 92% lower risk of liver cancer. Having liver stiffness (a measure of liver fibrosis) less than 10 kilopascals was associated with a 66% risk reduction.

Based on these findings, the study authors developed a risk calculator in which they asserted that those who, following DAA treatment, had albumin less than 4.4 g/dl had a low risk of liver cancer and those with an albumin of 4.4 g/dl or greater had a high risk. Those with liver stiffness during follow-up of less than 10 kPa, of 10 kPa to 20 kPa and of 20 kPa or higher had a low, moderate and high risk of liver cancer, respectively.

Those with liver stiffness of less than 10 kPa do not have zero risk of liver cancer, a finding that underlines the importance of ongoing monitoring for those cured of HCV.

“[W]ith the information provided by our study, patients and clinicians will possess the right information about the expected risk of HCC on an individual basis and, more importantly, it will serve to stress the importance of continuing HCC screening (especially in the high-risk groups) and maintaining adherence to these programs by the patients,” the study authors concluded.

To read the Healio article, click here.

To read the study abstract, click here.

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