Among Those on HIV Treatment, Hep B and C Is Tied to Lymphoma

Having either form of viral hepatitis was associated with about a 75 percent increased risk of non–Hodgkin lymphoma in a recent study.

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People receiving treatment for HIV have an increased risk of non–Hodgkin lymphoma if they also have hepatitis B or C viruses (HBV/HCV), Healio reports.

Publishing their findings in the Annals of Internal Medicine, researchers collected data from 18 of 33 cohort studies in the COHERE network. They analyzed data on 52,479 people living with HIV who initially had not started antiretroviral (ARV) treatment for the virus. A total of 40,219 (77 percent) did later start ARVs.

A total of 1,339 (2.6 percent) of the individuals had chronic hep B and 7,506 (14.3 percent) had chronic hep C. Those who started HIV treatment were followed for a median 50 months; 310 of these individuals developed non–Hodgkin lymphoma, for a rate of 0.168 per year.

The researchers found that among those who began HIV treatment, having hep B and hep C was associated with a respective 74 percent and 73 percent increased likelihood of developing non–Hodgkin lymphoma.

To read the Healio article, click here.

To read the study abstract, click here.

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