# The Annual Liver Meeting Roundup

The 2019 Liver Meeting in Boston provided an array of important findings about the treatment and prevention of chronic liver diseases.

December 24, 2019 By Benjamin Ryan

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The Liver Meeting, the Annual Meeting of the American Association for the Study of Liver Diseases, held in Boston in November, brought together many of the brightest minds in liver science, who shared their most recent research findings.

The following is a quick summary of Hep's reporting on the conference, including coverage of studies regarding hepatitis B, C and D viruses (HBV, HCV and HDV), non-alcoholic fatty liver disease (NAFLD), non-alcoholic steatohepatitis (NASH) and hepatocellular carcinoma (HCC, the most common form of liver cancer).

To read more about any of the referenced studies, click the hyperlinks.

Hepatitis B

An experimental vaccine reduced hepatitis B surface antigen (HBsAg) levels in people with HBV, with a small number of the study participants achieving a functional cure. The dual-component vaccine was designed to give rise to antibodies against the virus as well as a stronger immune-cell response.

In a Phase II study, selgantolimod, a potent and selective oral agonist of toll-like receptor 8, showed promise as a new treatment for HBV. The drug proved safe and well tolerated, with a small subset of the study participants achieving benchmarks of success against the virus.

Hepatitis C

A handful of studies about the direct-acting antiviral Mavyret (glecaprevir/pibrentasvir) showed it is highly effective at curing HCV among various subgroups of the hep C population, including people who inject drugs or who have a drug-use history and those with psychiatric disorders, a history of alcohol use and cirrhosis.

Addressing concerns about the rising epidemic of sexually transmitted HCV among gay and bisexual men in Western nations, a study found lower rates of such transmission among men who have sex with men taking pre-exposure prophylaxis (PrEP) against HIV in Canada, as compared with rates seen in European studies.

Among people who do not have cirrhosis when they receive HCV treatment, having diabetes is associated with a higher risk of subsequent liver-related complications and death.

For those without HCV who received a transplant of organs infected with the virus, just eight days of direct-acting antivirals plus the cholesterol medication Zetia (ezetimibe) either prevented these individuals from becoming infected or rapidly cleared the virus.

A Rhode Island study found that people on probation for a crime have a high rate of HCV and face many challenges when it comes to accessing medical care for the virus. The investigators called for greater testing of the virus among members of this population.

Hepatitis D

In a pair of studies, a combination of the experimental drugs lonafarnib or bulevertide along with interferon reduced the levels of HDV, also known as hepatitis delta, which can replicate only in the presence of HBV and for which there is no approved treatment.

NAFLD/NASH

A series of experimental drugs showed promise as a treatment for non-alcoholic fatty liver disease or its more severe form, non-alcoholic steatohepatitis. In three separate mid-stage trials, the drugs licogliflozin, saroglitazar and tropifexorall led to improvements in ALT liver enzymes and a reduction in body weight and liver fat content.

MSDC-0602K, an experimental insulin sensitizer, also lowered liver enzyme levels while improving the metabolism of glucose. However, the drug did not lead to significant improvements in liver biopsy results.

There were also disappointments on the NASH front. In trials, neither emricasan and selonsertib met the key endpoint that would have suggested these drugs are effective against the diseases: an improvement in liver fibrosis (scarring) of at least one stage without any worsening of NASH. Nevertheless, researchers are hoping these trials will help inform future research.

Taking a nonmedication approach, other investigators found that a minimally invasive outpatient surgery called duodenal mucosal resurfacing improves markers of both NASH and diabetes among people with both conditions. Clinicians insert a catheter down the esophagus and to the duodenum, which is the first part of the small intestine past the stomach, where they conduct a procedure meant to promote healthy growth of the organ's lining. The goal is to reduce insulin resistance and excess insulin in the blood.

In the absence of good medical treatments, weight loss remains a mainstay of fatty liver disease management. However, a study found that people with fatty liver disease may have more trouble losing weight than others.

Liver Cancer

Studies found that curing HCV is associated with improved survival among those with liver cancer, while treating HBV is tied to a reduced risk of developing the malignancy.

As for liver cancer treatment, a mid-stage clinical trial found that the combination of Opdivo (nivolumab) plus Yervoy (ipilimumab) improved outcomes among those with an advanced stage of the malignancy.

An analysis of deaths related to global liver disease found that while cirrhosis remains the primary direct cause of such mortality, liver cancer drove a greater than 10% five-year increase in the annual rate of such deaths. Liver cancer is largely caused by HBV, HCV, NASH and alcohol-related liver disease.

Among those with a history of liver cancer who receive a liver transplant, women have a lower risk of recurrence of the disease and tend to survive longer than men.

Quitting or refraining from smoking, eating a healthy diet, drinking little or no alcohol, exercising and achieving or maintaining a healthy weight are all associated with a lower risk of liver cancer and liver-related mortality. In fact, following these healthy lifestyle guidelines could prevent the majority of such deaths.

Drug Use

When people who inject drugs are cured of HCV, the highest rate of reinfection with the virus is seen among young men. That said, research indicates that medication-assisted treatment for opioid use disorder can greatly mitigate reinfection risk.

With the opioid epidemic causing a surge of new HCV cases among young people, a survey

conducted in California found that members of this population were often unaware of the risks for the virus upon receiving a diagnosis.

Alcoholic Hepatitis

A mid-stage trial of DUR-928, an experimental treatment for alcoholic hepatitis, found the drug was associated with numerous positive outcomes, including lower biomarkers tied to poor health outcomes as well as a 100% 28-day survival rate.

A pair of studies found that bacteriophage therapy, or the use of bacteria-killing viruses, showed promise as treatment for alcoholic hepatitis and primary sclerosing cholangitis, a rare liver disease characterized by liver inflammation and fibrosis within the bile ducts of the liver.

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