Liver Biopsies Miss 75% of Hep C-Related Cirrhosis Cases

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Relying solely on a liver biopsy to diagnose cirrhosis among people with hepatitis C virus (HCV) likely misses three in four cases of the advanced stage of liver disease, Reuters reports. Publishing their findings in the American Journal of Gastroenterology, researchers analyzed data on HCV-positive individuals in the Chronic Hepatitis Cohort Study who received cirrhosis tests between 2006 and 2010.

The study participants were tested with liver biopsies, diagnosis and procedure codes for cirrhosis or decompensated cirrhosis, or the FIB-4 scoring system, which estimates liver disease severity through blood tests.

Out of 9,783 participants, 2,788 (28.5 percent) had cirrhosis based on the study's criteria. Within this group, 661 (7 percent) had cirrhosis confirmed through biopsy, while the FIB-4 scoring system identified 2,194 cases (22 percent). Among those with cirrhosis identified through biopsy, 356 (54 percent) had the correct ICD-9 diagnosis code registered in their medical record. Based on this latter fact, the researchers concluded that relying on the ICD-9 coding data for analyzing electronic medical records may be an unreliable method.

Variables independently associated with a greater likelihood of cirrhosis were being older, male, Asian or Latino; having genotype 3 of hep C or HIV coinfection; previous treatment for hep C; and alcohol abuse. Variables linked with having a lower likelihood of cirrhosis were having private health insurance or hep C genotype 3, and being black.

To read the Reuters article, click here. (Free registration with Medscape is required.)

To read the study abstract, click here.

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