Major Liver Meeting Sheds New Light on Hepatitis C Care and Treatment

A roundup of key findings from the Annual Meeting of the American Association for the Study of Liver Diseases in Washington, DC

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In recent years, scientists at the Annual Meeting of the American Association for the Study of Liver Diseases in Washington, DC, have presented major findings that have revolutionized the treatment and care of people with hepatitis C virus (HCV).

At this point in the evolution of direct-acting antivirals (DAAs) for the treatment of hep C, the pharmaceutical pipeline has narrowed, owing to the impressively high effectiveness and tolerability of currently available treatments, not to mention their declining costs. (Not that such treatments have become inexepnsive by any stretch of the imagination.) So the hep C–related presentations at the Liver Meeting (as the scientific conference is called for short), held in Washington, DC, from October 20 to 24, were less groundbreaking and more concerned with filling in the cracks, so to speak, to address the unmet needs of those living with the virus.

To follow is a roundup of major findings presented at the conference. To read more about any of the studies, click the hyperlinks.

Treatment:

Gilead Sciences, the dominant player in the HCV drug market, saw good news for its recently approved Vosevi (sofosbuvir/velpatasvir/voxilaprevir), which cured 96 to 98 percent of those who had been previously treated with but not cured by DAAs. These high cure rates occurred despite the fact that nearly all the study's participants had mutations in their hep C that are associated with resistance to treatment.

Another Gilead regimen, Harvoni (ledipasvir/sofosbuvir), was safe and well tolerated among a small group of 18 people with severe kidney impairment, which is relatively common among people with hep C. All of them were cured of hep C. Additionally, researchers reviewed the medical records of more than 1,500 veterans with severe chronic kidney disease (CKD) and HCV who were treated with Merck's Zepatier (grazoprevir/elbasvir). Ninety-seven percent of those with stage 3 CKD and 96 percent of those with stages 4 or 5 were cured of the virus.

A pair of studies about AbbVie's new regimen Mavyret (glecaprevir/pibrentasvir) found that it is effective among seniors and those with genotype 3 of hep C. Pooled results from trials including nearly 2,400 people treated with the regimen, including 328 people age 65 and older, found that 98 percent of the seniors and 97 percent of the younger set were cured of hep C. And in an analysis of five Phase II and III studies of Mavyret among 570 people with genotype 3, considered the most difficult to treat, the regimen cured 95 to 97 percent of the participants.

As for experimental hep C treatments, the JNJ-4178 regimen, developed jointly by Janssen and Achillion, cured HCV in a respective 99 percent and 98 percent of those treated for just six and eight weeks.

Various studies examined the benefits of curing hep C. One found that a large group of individuals treated for the virus when they had minimal or no liver fibrosis showed almost no evidence of liver-health problems up to three years later. The findings of another study supported the hypothesis that beating the virus helps prevent individuals from developing type 2 diabetes. One study found that up to three years post–hep C cure, individuals experienced improvements on every measure of health-related quality of life. And yet another study found that among those with cirrhosis and hep C, treating the virus reduces hospitalizations as well as associated costs.

Liver Transplants:

Two studies examined ways to potentially expand liver transplantation opportunities.

One study focused on the surgical practice common in the United Kingdom but rare in the United States of splitting livers from deceased donors into unequal parts and giving the smaller one to a child and the larger to an adult. Researchers estimated that of the 35,000 livers available for transplant between 2010 and 2015, about 1,100 were suitable candidates for splitting—more than the number of children who died during that period while waiting for a transplant.

Another study found that transplanting livers from donors who test positive for viral genes is tied to only a modest risk of transmitting the virus to the recipient, who in many cases can then receive successful DAA treatment.

At a major transplant center in Indiana, 26 percent of whites received a transplant compared with 14 percent of Blacks, despite having similar levels of liver disease severity. Twenty percent of whites and 31 percent of Blacks at the center received palliative or hospice care while a respective 16 percent and 10 percent received surgery to remove all or part of their liver tumors.

Addiction:

A survey of about 200 addiction specialist clinicians identified various factors they perceive as barriers to treating hep C among people receiving opioid agonist therapy for addiction to drugs such as heroin or prescription painkillers. By identifying such obstacles, including long wait times to see a specialist health care provider and insurance company restrictions on covering DAAs because of drug or alcohol use, the investigators hope their research can prompt related solutions.

Testing positive for hep C through an addiction treatment center can help individuals make healthier choices. Individuals in a study of more than 500 Canadians who faced a diagnosis in this context were about 50 percent more likely to significantly decrease their use of nonprescribed opioids, benzodiazepines (such as Xanax), cocaine and other substances compared with their peers who tested HCV negative.

Liver Cancer:

Bristol-Myers Squibb's Opdivo (nivolumab), which aids the immune system in combating cancer, caused liver cancer tumors to shrink or the disease to stabilize in more than half of a group of 262 people who received the treatment. The median overall survival time was 15 months.

In a study of people with hepatitis B virus (HBV), 3 percent of those who took daily aspirin therapy and 6 percent of those who did not developed liver cancer over a five-year period. After controlling the data for various factors, researchers concluded that daily aspirin therapy was associated with a 47 percent lower rate of liver cancer in this group.

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