Those Treated With Newer Hep C Drugs Have Lower Non-Liver Cancer Rates

The link between the older interferon treatment and these cancers may be related to the drug's low hep C cure rate.

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Among people with hepatitis C virus (HCV), those treated with interferon have a higher rate of non-liver cancers than those treated with interferon-free direct-acting antiviral (DAA) regimens, InfoHep reports.

Presenting their findings at the 52nd International Liver Congress in Paris, researchers from Gilead Sciences analyzed data on 367,156 people with hep C whom they identified through U.S. health insurance claims databases. Then they used insurance claims information to determine the type of hep C treatment these individuals received, if any, and whether they were diagnosed with any cancers.

The investigators looked at the periods January 2006 to May 2011, during which interferon was the mainstay of hep C treatment, and December 2013 to March 2017, during which interferon-free DAA treatment was available and interferon fell by the wayside.

All told, the study authors found 10,989 people who were treated with interferon and 22,894 people who received DAAs. Those who received interferon and DAAs had a median age of 51 and 57 years, respectively. Compared with the DAA-receiving group, those who took interferon tended to have a lower rate of other health conditions (known as comorbidities) and fewer cancer risk factors, such as smoking and obesity, and had less advanced liver disease.

Compared with those who received interferon, those treated with DAAs had a 14 percent lower rate of cancer overall, including lower rates of prostate cancer, lung cancer, leukemia and bladder cancer. The most common cancer in the study group was prostate cancer, occurring at a rate of three cases per cumulative 1,000 years of follow-up, while leukemia occurred at one third that rate. Compared with receiving interferon, receiving DAAs was associated with a respective 29 percent and 62 percent lower rate of prostate cancer and leukemia.

The study authors concluded that the differences in cancer rates might have been driven by the

differences in hep C cure rates between those treated with interferon (a treatment that was only moderately effective at curing HCV) and those treated with DAAs (which are highly effective).

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