Hepatitis C, Cirrhosis, and Liver Cancer

September 14, 2015 By Lucinda K. Porter RN

A reader, who was cured of hepatitis C, asked a question about liver cancer risk, “I had cirrhosis before treatment, and likely still have it now. My doctor wants me to continue to see him for regular monitoring. He said liver cancer is a high risk for hep C patients who have cirrhosis. I was hoping that being cured of hep C meant not having to be concerned about possible consequences from the virus.” The reader also mentioned having gained weight during treatment.

Cirrhosis is the problem here. This person’s hep C was cured, but the cirrhosis may not have been. Sometimes cirrhosis can improve, but usually it remains. The presence of cirrhosis means there is a higher than average risk for a type of liver cancer known as *hepatocellular carcinoma (HCC)*.

Here’s my response:
If you have cirrhosis, you are at a higher risk for liver cancer than if you didn’t have hep C. However, it is not a high risk--it is still relatively low. Just as people have regular mammograms and colonoscopies, you will need to have lab work and ultrasounds if you have cirrhosis. In some ways, I wish we all had to have these, since I lost three friends to liver cancer last year, and not one had hep C. (Last year I also lost two hep C-positive friends to liver cancer.) Liver cancer is on the rise.

One thing you can do to help protect yourself is try to lose the weight you gained, since fatty liver disease is a huge problem in the U.S. Fatty liver disease is on its way to replacing hep C as the leading cause of for liver transplantation in the U.S. Since you have cirrhosis, I assume your doctor advised you to abstain from alcohol, avoid raw or undercooked shellfish, use caution with medications and supplements (prescribed and over-the-counter), and keep your immunizations current. Aim for the healthiest lifestyle you can, such as those suggested on Hep’s website.

The American Association for the Study of Liver Diseases (AASLD) and Infectious Diseases Society of America (IDSA) *HCV Guidelines* recommend the following for hepatitis C patients who achieve a sustained virologic response (SVR) but still have cirrhosis:

- "*Surveillance for hepatocellular carcinoma with twice-yearly ultrasound testing is recommended for patients with advanced fibrosis (ie, Metavir stage F3 or F4) who achieve an SVR.*
- *A baseline endoscopy is recommended to screen for varices if cirrhosis is present. Patients in whom varices are found should be treated and followed up as indicated.*"

Many people live a long and full life despite having cirrhosis. Most do not develop liver cancer, however, some do, such as Hep blogger Karen Hoyt. She cleared hep C, but her cirrhosis remained, and she

developed HCC. Karen received a liver transplant this April, and now lives without hep C, liver cancer, or cirrhosis. She is an example of how wide the arms of hope extend.

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