More Hepatitis C News From the 2018 International Liver Congress

April 16, 2018 By Lucinda K. Porter RN

On Friday, I summarized three research projects presented at the 2018 International Liver Congress (ILC). Here are three more. (Note: Conference presentations represent part of the story and unless and until these studies are published in a peer-reviewed journal, these data and conclusions are considered preliminary.)

Abstract: PS-058 Early versus delayed hepatitis C treatment provides increased health benefits at lower costs: A pan-genotypic cost effectiveness analysis set in Scotland - B. Pinsky, et al.

Summary: This industry-sponsored (AbbVie) modeling study analyzed the overall risks and benefits of early versus delayed hepatitis C treatment. Using Scotland's estimated 46,657 people with hep C, researchers found that the cost of treating patient with cirrhosis is nearly twice what it is to treat patients with little or no fibrosis. Moreover, early stage hepatitis C treatment extends life, saves money in drug and medical costs, and reduces risk of decompensated cirrhosis, hepatocellular carcinoma (liver cancer), liver transplant and liver-related death.

Editorial Remarks: This research didn't include the fact that treating hepatitis C early reduces risk of lymphoma, cardiac disease, stroke, and cancer. Every insurer, whether private or state-funded, needs to read this study. Click here to see what your state's Medicaid plan offers people in early stages of fibrosis.

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Abstract: PS-151 Survival benefits of direct-acting antiviral therapy in patients with decompensated hepatitis C cirrhosis - W.R. Kim, et al.

Summary: We know that hepatitis C patients with the most advanced cirrhosis (decompensated cirrhosis) have an improved liver function after successful treatment (SVR) using direct-acting antivirals (DAAs). This study of 492 patients looked a bit further to see if DAA therapy impacts mortality. This team of investigators found that DAA therapy in HCV patients with decompensated cirrhosis had a significant improvement in mortality.

Editorial Remarks: In the previous abstract, researchers found clear advantages to treating hepatitis C early rather than later. This abstract strongly suggests that there are still benefits to treating hepatitis C even at its latest stages. Now that we have HCV DAAs, hope abounds.

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Abstract: THU-392 Minimal monitoring of direct-acting antiviral therapy within a real world, urban population - B. Emmanuel, et al.

Summary: This study investigated the monitoring of hepatitis C patients who underwent direct-acting antiviral therapy (DAA) treatment in a real world, urban setting. There were 551 patients in this study, predominately male (69 percent), black (96 percent), genotype 1a (72 percent), treatment-naïve (82 percent) with 21 percent cirrhotic and 20 percent HIV/HCV-coinfected. Of these, 134 patients (24 percent) had 100 percent adherence to health care provider visits. Comparing this to the 417 (76 percent) who did not strictly adhere, the treatment success rate was (SVR) was 96 percent for those who strictly adhered to their visits compared to 83 percent for those who did not.

Prescription adherence was measured, which is measured by picking up all prescription bottles. Comparing those who did (477 or 87 percent) versus those who didn't (74 or 13 percent), SVR was 90 percent vs. 62 percent. Those who strictly adhered to visits and picking up prescriptions had SVR rates of 96 percent vs. 58 percent.

The researchers concluded that SVR likely can be achieved with a minimal approach which includes adherence to most prescriptions and some provider visits.

Editorial Remarks: I really like this study because it shows that we may be able to find ways to treat more people, while putting less of a burden on specialists. Obviously the goal is for people to take all or most of their medications all or most of the time. Health care appointments might not be the way to increase adherence, but it is certainly important that people have their hepatitis C medicines and that they take it. I'd like to see more of these studies.

Tomorrow I summarize more research presented at the 2018 International Liver Congress.

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