The Latest Cancer Research: Hepatitis and Your Diet

March 11, 2019 By Lucinda K. Porter RN

In today's blog, I want to discuss two important studies published recently in JAMA Oncology. The first was a large study of 125, 455 participants in the United States. Wanshui Yang and colleagues reported that an increased intake of whole grains was associated with reduced risk of a type of liver cancer (hepatocellular carcinoma). The study title is, Association of Intake of Whole Grains and Dietary Fiber With Risk of Hepatocellular Carcinoma in US Adults (February 21, 2019).

So when reaching for grain-based foods, make them whole. We already know that there are other benefits from eating a high-fiber diet, so upping your quinoa intake may also help to reduce your risk of hepatocellular carcinoma.

The second study was regarding the high prevalence of undiagnosed acute and chronic hepatitis B and C in cancer patients. Hep reported on this research, but I want to unpack the story again.

Investigators from the SWOG Cancer Research Network conducted the study and published the results in JAMA Oncology (January 17, 2019). The SWOG team stated in their press release, "…a substantial portion of newly diagnosed cancer patients with hepatitis B or C were unaware of their viral infection. Many had no identifiable risk factors for these infections, such as injection drug use."

The study collected data from 3051 participants with an average age of 60.6 years. Around 60 percent were female (n = 1842);18 percent were Black (n = 553); and 18 percent were Latino (n = 558). The prevalence of participants with previous hepatitis B infection was 6.5 percent (n = 197), current chronic hepatitis B was 0.6 percent (n = 19), hepatitis C was 2.4 percent (n = 71), and HIV was 1.1 percent (n = 34).

In addition to the known viral infections, 32 participants were diagnosed for the first time: 8 had chronic hepatitis B, 22 had hepatitis C, and 2 had HIV.

The number of participants with no identifiable risk factors infections were 4 with chronic hepatitis B, 21 with hepatitis C, and 7 patients with HIV.

The Bottom Line: We have known for many years that people with hepatitis C have an increased risk of dying from most types of cancers. Now we have solid evidence supporting the screening of patients with cancer to identify HBV and HCV infection. Personally, I support universal screening

for hepatitis B and C. Why wait for cancer in order to find out a person might also have viral hepatitis? Hepatitis A and B screening is an economical choice compared to treating people for the cancer and other serious consequences of viral hepatitis.

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