CURE OF HCV RELATED LIVER DISEASE? NO

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We can now “cure” HCV in almost all patients

However, we may not cure organ damage from HCV

- Liver fibrosis
- Cirrhosis
- Extra-hepatic injury

Until these “scars” resolve our patients remain at risk

- HCC
- Mortality
- Reduced quality of life
Elevated ALT in patients with SVR:
- 2-8% of patients treated with PEGINF
- 1% of patients treated with oral anti-viral therapy

What causes this?
- INF induced immune hepatitis
- Another co-existent liver disease
- NAFLD
- Alcohol consumption
Since liver biopsy is now rarely performed co-existent liver disorders may be missed.

Monitor patients and serum ALT for at least a few years after SVR.

Serologies for other causes of liver disease if ALT is persistently or intermittently elevated.

Ultrasound to screen for fatty liver.

Consider liver biopsy to define etiology.
AN SVR MAY NOT CURE THE LIVER ASSESSMENT BY FIBROSURE

Patients with SVR
N=171
Fibrosis Regression

Patients with SVR
N=171
Fibrosis Progression

PATIENTS WITH SVR MAY DEVELOP CIRRHOSIS

Why do 12% of patients progress to cirrhosis?
• They actually had cirrhosis before treatment
• Interferon stimulation of the immune response.
• Will not be seen with oral anti-viral agents
• Co-existant NAFLD
• ETOH
• Other unrecognized liver disorders

SVR MAY NOT CURE THE LIVER PERSISTANCE OF LIVER INJURY

ML Shiffman et al.
SVR MAY NOT CURE THE LIVER PERSISTENCE OF FIBROSIS

ML Shiffman et al.  
SVR MAY NOT CURE THE LVIER
THE POINT OF NO RETURN

- N=120 patients
- Advanced cirrhosis
- Treated 12 weeks
- SOF+SMV
- Overall SVR = 81%
- Patients with MELD >20 did not appear to improve
- HCC developed in some patients that appeared to improve

ML Shiffman et al.
Hepatology 2015; (submitted).
SVR MAY NOT CURE THE LIVER PERSISTANCE OF HCC RISK

AJ van der Meer et al.
JAMA 2012; 308:2584-2593.
SVR MAY NOT CURE THE PATIENT
PERSISTANCE OF MORTALITY RISK

AJ van der Meer et al.
JAMA 2012; 308:2584-2593.
ASSESSING THE LIVER AFTER SVR APPROACH

• Fibroscan or fibrosure annually until fibrosis has completely resolved
• In patients with cirrhosis:
  ▪ Ultrasound every 6 months to screen for HCC
• Until:
  ▪ All liver function studies and platelets are normal
  ▪ Fibroscan or fibrosure no longer suggests advanced fibrosis
SVR MAY NOT CURE THE PATIENT PERSISTANCE OF NON-LIVER INJURY

- Although cryoglobulinemia resolves in patients with SVR organs which have been injured by cryoglobulins do not appear to recover
  - CKD secondary to MPGN
  - Neuropathy
  - Neurocognitive changes
- B cell lymphoma
- Diabetes mellitus
- Fatigue
- Quality of life

PREVENTING HCV RELATED DISEASE IMPACT OF SVR/TREATMENT

CURING HCV RELATED DISEASE
MAJOR ISSUES

• Curing HCV does not cure liver disease
  ▪ We need to properly assess the patient for evidence of liver disease before and after the patient has been cured of HCV.
  ▪ Ensure that the liver disease has in fact resolved.

• Curing HCV does not cure extra-hepatic injury
  ▪ All the more reason to treat HCV before it damages the liver and extra-hepatic sites
It’s now the 8th PHC
And since 2004
when Patrick first opened the door
We can finally cure

Almost all affected by HCV
With drugs produced by BMS, Gilead, and AbbVie
PHC 2015: CURING HCV DISEASE
SUMMARY

But what about the liver with scar
If there is no virus can they return to the bar
Or should they venture not to far
Until their liver tests are all normal
And their dismissal from care can finally be formal
But for some it may be too late
A high MELD or HCC has left them at the gate
And for a transplant they must wait
In order to prolong their mortality date
For others it’s the immune response outside the liver
That has damaged nerves and causes muscles to quiver
Affected the kidney
Caused lymphoma
Or preventing the blood sugar from going any lower

These effects of HCV may not go away
And will cause symptoms for years and a day
So on this solemn week in France
We have discussed the HCV treatment advance

And like many things in society today
We must be vigilant to things (like HCV) that prey
Stand in solidarity and tell both producers
and those that pay
That limiting treatment is not the way
The only approach for patients to be disease free is to treat everyone and eliminate the scourge we call Hep C. Thank you for your attention and LeSuis Charlie.