CURE OF HCV RELATED LIVER DISEASE

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HCV Infection

Chronic Hepatitis 75%-85%

15%-20% Cirrhosis

Decompensated Cirrhosis

HCC

Almost All HCV-Infected Patients Can Achieve SVR

GT 1 – 6

F0 – F4

D. Cirrhosis

SVR $\rightarrow$ 90% = Cure of HCV Infection $\rightarrow$ 90%
Anti-HCV Treatment Objectives

1. Stop/reverse liver fibrosis progression
2. Prevent/reverse cirrhosis
3. Prevent liver decompensation and HCC
4. Reduce liver related mortality

HCV eradication may achieve these objectives?
Fibrosis regression
*IFN based therapy experience*

Fibrosis « survival » according to virologic response: Proportion of patients without fibrosis regression using FibroTest (→0,20)

Poynard T. et al. *J Hepatol* 2013

![Graph showing fibrosis survival vs. different groups.](image-url)
Fibrosis regression
*IFN based therapy experience*

Fibrosis degree at a second biopsy 5 years after SVR (n=122) grouped according to the degree of fibrosis at first biopsy:

- **Cirrhosis**
- **Bridging Fibrosis**
- **Portal Fibrosis**
- **No Fibrosis**

*Shiffman M. et al. Ann Hepatol. 2014*
Cirrhosis reversion
*IFN based therapy experience*

Liver Decompensation

IFN based therapy experience

Proportion of liver decompensation according to virologic response

Timothy RM. et al. Hepatology 2010
Liver Decompensation

IFN based therapy experience

Proportion of liver failure according to virologic response

Van der Meer AJ. et al. JAMA 2012
Hepatocellular Carcinoma

IFN based therapy experience

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Liver Related Mortality
IFN based therapy experience

Timothy RM. et al. Hepatology 2010
Van der Meer AJ. et al. JAMA 2012
HCV CURE

FIBROSIS REGRESSION
50%-60% at 5 yrs

CIRRHOSIS REVERSION

LD PREVENTION

HCC PREVENTION
5-10 fold risk reduction

MORTALITY REDUCTION
2-3 fold risk reduction
HCV CURE
FIBROSIS REGRESSION
50%-60% at 5 yrs
CIRRHOSIS REVERSION
5-10 fold risk reduction
LD PREVENTION
HCC PREVENTION
2-3 fold risk reduction
90%+ SVR
• Residual proportion of patients (1-7%) may not normalize ALT despite SVR and are at risk of progression to cirrhosis, LD↑ or HCC
  - Investigations for other causes (NASH, Drug-induced hepatotoxicity, Alcohol abuse ...)

• Cirrhosis may not reverse in all the cases
  - HCC screening advised
  - Cirrhosis reversion monitoring using non invasive methods

• Viral hepatitis represent only ~2/3 of liver diseases