

SEVERE LIVER DISEASES & HIV INFECTION

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Liver diseases ranks as a serious cause of morbidity and mortality in HIV – infected persons, whose HIV disease is effectively controlled with HAART.

HCV and HBV represent the most significant causes of liver disease in HIV – infected persons

The shared routes of transmission for HIV, HCV, HBV help to explain the phenomenon.

Even more the elevated transaminases in HIV-infected patients in the absence of chronic viral hepatitis suggest other causes of ongoing liver injury.

SEVERE LIVER DISEASE AND HIV INFECTION

POTENTIAL OTHER CAUSES OF LD

- **Alcoholic hepatitis**
- **Alcoholic cirrhosis**
- **Non alcoholic fatty liver disease**
- **Drug induced liver injury**
- **Autoimmune hepatitis**
- **PBC , PSC**
- **Haemochromatosis**
- **Wilson disease**
- **A1 antithrypsin deficiency**

SEVERE LIVER DISEASE AND HIV INFECTION

HIV persons are at high risk for life-threatening complications of cirrhosis, such as

- Liver failure
- Ascites
- Variceal bleeding
- Encephalopathy
- HCC (3-6 fold), faster in HIV/HCV patients

CASE 1

- Male, born in 1967
- Hemophiliac (Hemophilia A severe)
- First transfusion in early childhood
- Smoker ~20 cigarettes/day (started in 1984)
- Social drinker (not alcoholic)
- HIV positive (first positive sample 1985)
- HCV positive (f. p. s. 1992)
- HBsAg positive (unknown origin) 1979

ART HISTORY

- Patient of the 2nd Hemophilia Center, ‘Laiko’ Hospital – Athens Greece
- 1993: started ART with Zidovudine
- 1995: added Didanosine
- 1996: stopped DDI and added Lamivudine
- 1997: added Saquinavir
- 1998: Stavudine+ Lamivudine+ Indinavir
- 2004: LAM+TDF+Efavirenz
- 2008: Truvada+Lopinavir/r

1996

- Liver biopsy: grade 8, stage 2
- ALT/AST: $\geq 1.5\text{-}2 \times \text{ULN}$

2001

- HCV RNA positive, GT 4a/4c/4d
- CD4 374/mm³, TSH normal
- Therapy for HCV: pegylated IFN α-2b 100 µg/wk and ribavirin 1000 mg every day, divided in 2 doses
- Treatment duration 48 weeks
- No treatment details

2003-2008

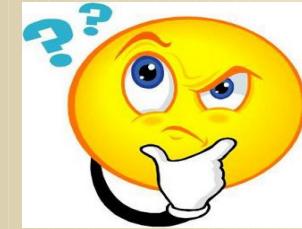
- HCV RNA positive
- Abnormal transaminases,
PLT
 $200,000 \rightarrow 110,000/\text{mm}^3$

2009

- CT: small nodule in liver segment VII.
- MRI: nodule $\leq 2\text{cm}$, hypervascularized in the arterial phase and not seen in the second phase. Diffuse chronic hepatocellular disease. Splenomegaly.

Differential Diagnosis

- HCC?
- Dysplastic nodule?
- Hematoma?
- AFP=10.8 ng/ml

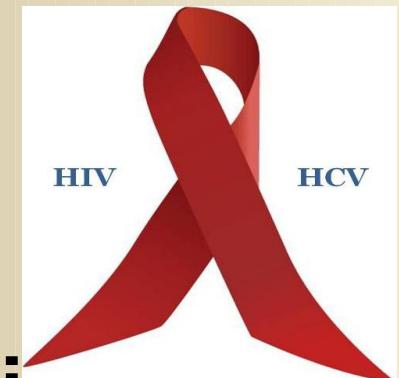


2009-2011

- No action taken
- Every 6 months U/S and MRI
- No difference

Feb 2011

- Fibroscan: 36.3 kPa
- Gastroscopy: HP-positive gastritis
- HCV RNA 1.8×10^6 IU/ml
- HBV DNA <45 IU/ml
- HIV RNA <50 cp/ml, CD4 340/mm³



New
thera



- Response to IFNa? Compliance?

July 2011

- Started Peg-IFNa-2a 180 µg/week & Riba 1000 mg every day, divided in 2 doses.
- 12 weeks (10/2011): HCV RNA <20 IU/ml
- 24 weeks (01/2012): HCV RNA not detectable
- 48 weeks (06/2012): HCV RNA not detectable
- MRI: no nodule; nodular, focal severe fibrosis in segment VIII

- **01/2013 – Detectable HCV RNA (relapse)**
- **Hemophiliac patient, male, 46 years old**
- **On HAART for 20 years**
- **Now on Kaletra (lopinavir/ritonavir) + Truvada (tenofovir/emtricitabine)**
- **Fibroscan 46.4 kPa**
- **Treatment did not help? Other causes?**

Metabolic profile

- Glucose normal
- Cholesterol levels normal

HDL <40 mg/dl

LDL normal

Triglycerides 180 mg/dl

- Waiting for new drugs

2012-2014

- Telaprevir/Boceprevir? (GT1)

04/2014

- Gastroscopy: 2 small esophageal varices – esophagitis
- Start propanolol 20 mg x2, Lansoprazole 30 mg x1

NEW DAAS - 2014

- ✓ **SOFOSBUVIR (NS5B polymerase inhibitor)**
- ✓ **SIMEPREVIR (Protease inhibitor)**
- ✓ **DACLATASVIR (NS5A inhibitor)**

Treatment options for GT4 - 2014

With IFNa

- Sofosbuvir (SOF) + Peg-IFNa + RBV (x12 weeks)
- Simeprevir (SMV) + Peg-IFNa + RBV (x48 weeks)
- Daclatasvir (DCV) + Peg-IFNa + RBV (x48 weeks)

Without IFNa

- SOF + RBV (x24 weeks)
- SOF + SMV ± RBV (x12 or 24 weeks,



HCV & HIV coinfection



Sofosbuvir

Simeprevir

Daclatasvir

Drug-Drug interactions with HIV drugs

None

Not with cobicistat*, efavirenz, delavirdine, etravirine, nevirapine, ritonavir & any HIV protease inhibitor

Not with darunavir, lopinavir, etravirine & nevirapine - DCV 30 mg with atazanavir/r, DCV 90 mg with efavirenz.

*cobicistat: elvitegravir + cobicistat + emtricitabine + tenofovir

2015

- HCV RNA 8.02×10^5 IU/ml
- AFP 15.5 ng/ml
- ALT/AST 98/94 IU/L
- ALP 204 U/L (ULN: 130), GGT 86 U/L
- Alb 3.6 g/dl
- PLT 85,000/mm³
- WBC, Hb, PT normal
- Fibroscan 35.3 kPa

NEW DAAS - 2015

- ✓ **LEDIPASVIR/SOFOSBUVIR (LDV/SOF) (NS5A inhibitor/ NS5B polymerase inhibitor)**
- ✓ **PARITAPREVIR/ritonavir/OMBITASVIR (PRV/r/OMV) (Protease inhibitor/NS5A inhibitor)**
- ✓ **DASABUVIR (DSV) (Non-nuc polymerase inhibitor)**

Treatment options for GT4 - 2015

Without IFNa

- LDV/SOF ± RBV (x12 or 24 weeks)
- PRV/r/OMV ± RBV (x12 or 24 weeks)



HCV & HIV coinfection

Sofosbuvir

Drug-Drug interactions with HIV drugs

Simeprevir

None

Daclatasvir

Not with cobicistat, efavirenz, delavirdine, etravirine, nevirapine, ritonavir & any HIV protease inhibitor

Sofosbuvir/Ledipasvir

Not with darunavir, lopinavir, etravirine or nevirapine - DCV 30 mg with atazanavir/r, DCV 90 mg with efavirenz

Paritaprevir/r/Ombitasvir ± Dasabuvir

Not with cobicistat, tripanavir/r

Not with efavirenz, rilpivirine or lopinavir



July 2015

- Harvoni (1 tablet/day)
(ledipasvir
90mg + sofosbuvir 400mg)
- EASL Recommendation: A1