Advances in Chronic Hepatitis C: Management and Treatment

COMPREHENSIVE EXPERT REVIEW AN

AN INDEPENDENT CME ACTIVITY JOINTLY PROVIDED BY POSTGRADUATE INSTITUTE FOR MEDICINE AND VIRALED, INC

Hepatitis B Reactivation Associated with Direct Acting Antiviral Therapy for Hepatitis C: A Review of Spontaneous Post-Marketing Cases

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Abstract LB-17

HBV Reactivation Associated with DAA Therapy for HCV: A Review of Spontaneous Post-Marketing Cases

Age in years (n=29) Mean (60.7) Median (58) Range (36-85)

Male (n=13) Female (n=16)

Country of Report USA (n=5) Japan (n=19) Other (n=5)

Days to Event (n=28) Mean (53) Median (46) Range (14-196)

Yes (n=7)

Treatment Delay

Outcome

DAA Therapy

Possible (n=7)

No treatment given or treatment not stated (n=13)

HCV Genotype Genotype 1 (n=16) Other genotype (n=2) Not reported (n=11)

HBsAg (+) n=13

HBsAg (-) n=4 HBsAg Not reported n=12 HBcAb (+) n=6 HBcAb Not reported n=23

Baseline HBV Viral Parameters

HBsAb (-) n=3

HBsAb Not reported n=26 HBV DNA undetectable n=16

HBV DNA detectable n=9

HBV DNA baseline either not reported or detectability status unclear n=4

Death (n=2); Transplant (n=1); Hospitalization (n=6); Other (n=20)

Discontinued (n=10); Completed (n=13); Not Reported (n=6)

Entecavir (n=9); Tenofovir (n=6), Tenofovir/Emtricitabine (n=1); Not Reported (n=6); No Treatment (n=7) **Treatment for HBV**

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Baseline HCV/HBV Virological Characteristics and DAA Used

Case #	HBsAg	HBsAb	HBcAb	HBeAg	HBeAb	HBV DNA in IU	Direct Acting Antiviral (DAA)
1				NEG	POS	2700 (elevated)	OBV/PTV/r + DSV/RBV
2	POS		POS	NEG	POS	2.5 log (elevated)	DCV/ASV
3				NEG	POS	Undetectable	DCV/ASV
4	POS			NEG	POS	3.9 log (elevated)	DCV/ASV
5				NEG	POS	2300 (elevated)	SIM/SOF
6	NEG	NEG	POS			Undetectable	SIM/SOF
7	NEG	NEG	POS			Undetectable	SIM/SOF/RBV
8	POS					244 (elevated)	SOF/RBV
9	NEG	NEG	POS	NEG	POS	Undetectable	LDV/SOF
10	POS					Undetectable	LDV/SOF
11			POS			Undetectable	LDV/SOF
12	POS			NEG	POS	Undetectable	SIM/PEG/RBV
13	POS			NEG	POS	Undetectable	SOF/RBV
14	POS					1.3 log (elevated)	LDV/SOF
15	POS			NEG	POS	2.7 log (elevated)	DCV/ASV
16						Undetectable	LDV/SOF
17	POS		POS	NEG	NEG	Undetectable	DCV/SOF/RBV
18				NEG	POS	3.6 log (elevated)	LDV/SOF
19	POS			NEG	POS	<2.1 log	DCV/ASV
20	POS			NEG	POS	Undetectable	DCV/ASV
21				NEG	NEG	Undetectable	DCV/ASV
22						<2.1 log	DCV/ASV
23						Undetectable	LDV/SOF
24				NEG		3.3 log (elevated)	DCV/ASV
25						Undetectable	DCV/ASV
26	POS					<2.1 log	LDV/SOF
27						Undetectable	DCV/ASV
28	NEG					NR	LDV/SOF/RBV
29	POS				POS	Undetectable	LDV/SOF

Blank cell = test result not reported

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INDEPENDENT REPORTING ON AASLD 2016

COMPREHENSIVE EXPERT REVIEW AND DISCUSSION OF KEY PRESENTATIONS

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Hepatitis B Reactivation After Interferon-Based Therapy versus Pan-Oral Direct Acting Antiviral Agents in Chronic Hepatitis C Patients Co-infected with Hepatitis B Virus: A Systematic Review and Meta-analysis

Cheng Wang, Bing Li, Jing Chen, Huiming Liu, Dong Ji, Qing Shao, Xiaoyong Zhang, Vanessa Wu, Yudong Wang, Lei Lu, Jian Sun, Jinlin Hou, Guofeng Chen, George Lau

Abstract 918

HBV Reactivation After IFN Based Therapy vs. All Oral DAA HCV Therapy in HCV/HBV Coinfected Subjects Hepatitis Due to HBV Reactivation Interferon-based Yalcin (2002) 0.200 (0.005, 0.716) 1.77 Chuang (2005) 0.000 (0.000, 0.084) 8.67 Saitta (2006) 0.000 (0.000, 0.336) 2.87 Senturk (2008) 0.000 (0.000, 0.097) 7 91 Potthoff (2008) 0.000 (0.000, 0.176) 5.14 Yu (2009) 0.020 (0.001, 0.106) 9.55 Erol (2009) 0.000 (0.000, 0.459) 2.05 Liu (2009) 0.000 (0.000, 0.023) 15.17 Vigano (2009) 0.000 (0.000, 0.154) 5.72 Hung (2011) 0.000 (0.000, 0.027) 14.43 Kim (2011) 0.056 (0.001, 0.273) 4.94 0.015 (0.003, 0.043) 16.05 Yeh (2015) Subtotal (I^2 =13.242%, p =0.315) 0.000 (0.000, 0.002) 94.27 DAAs-based Wang (2016) 0.300 (0.067, 0.652) 3.13 Gane (2016) 0.000 (0.000, 0.369) 2.61

.25

0.122 (0.002, 0.332)

0.000 (0.000, 0.011)

.75

Proportions %

5.73

100.00

Subtotal (I^2 =92.113%, p =0.000)

Heterogeneity between groups: p =0.009 Overall (I^2 =44.032%, p =0.039);

Nang C, et al. 67th AASLD; Boston, MA; November 11-15, 2016; Abst. 918.

ADVANCES IN CHRONIC HEPATITIS C:
MANAGEMENT AND TREATMENT
INDEPENDENT REPORTING ON AASLD 2016

COMPREHENSIVE EXPERT REVIEW AND
DISCUSSION OF KEY PRESENTATIONS

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Incidence and Pattern of "De Novo" Hepatocellular

Carcinoma in HCV Patients Treated with Oral DAAs

Antonietta Romano, Franco Capra, Sara Piovesan, Liliana Chemello, Luisa Cavalletto, Georgios Anastassopoulos,
Valter Vincenzi, PierGirogio Scotton, Sandro Panese, Diego Tempesta, Martina Gambato, Francesco P. Russo,
Tosca Bertin, Maurizio Carrara, Antonio Carlotto, Giada Carolo, Giovanna Scroccaro, Alfredo Alberti

Abstract 19

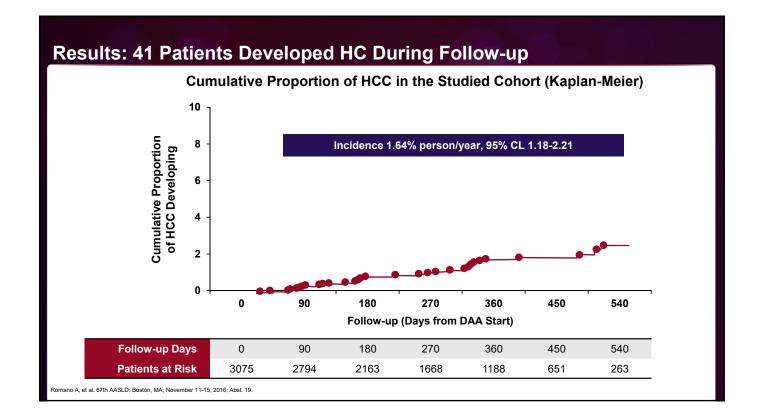
Arial Incidence and Pattern of "De Novo" Hepatocellular Carcinoma in HCV Patients Treated with Oral DAAs 2 pt.

PATIENTS INCLUDED: 3075 Mean Follow-up: 300.8 ±100 days after initiation of DAAs

Baseline Characteristics				
Males/Females n (%)	1937/1138 (63/37)			
Mean age years (range)	58.1±10.1 (18-90)			
Genotype				
Genotype 1 a n (%)	588 (19.1)			
Genotype 1 b n (%)	1320 (43)			
Genotype 2 n (%)	391 (12.7)			
Genotype 3 n (%)	524 (17)			
Genotype 4 n (%)	237 (7.7)			
Genotype 5 n (%)	15 (0.4)			
Stage of Liver Disease				
Fibrosis F3 n (%)	853 (27.7)			
Cirrhosis CHILD A n (%)	2007 (65.3)			
Cirrhosis CHILD B n (%)	215 (7)			

Baseline Characteristics					
Comorbidities					
Diabetes n (%)	346 (11.2)				
Obesity n (%)	166 (5.3)				
CVD n (%)	456 (14.8)				
DAA Regimens					
SOF/RBV 12-24 wks n (%)	563 (18.3)				
SOF/SMV±RBV 12 wks n (%)	312 (10.1)				
SOF/LDV±RBV 12-24 wks n (%)	1040 (33.8)				
SOF/DCV±RBV 12-24 wks n (%)	449 (14.6)				
OMV/PTV/RTV±DSV±RBV 12-24 wks n(%)	711 (23.1)				
Previous Therapy					
Naive n (%)	1719 (55.9)				
Experienced n (%)	1356 (44.1)				

Romano A, et al. 67th AASLD; Boston, MA; November 11-15, 2016; Abst. 19.



Results: HCC Incidence in Cirrhotics by Subgroups (Multivariate Analysis)

HCC Incidence in Cirrhotics by Subgroups

(Multivariate Analysis)

Multivariate Cox's Regression (Forward Stepwise Selection)

	HR	95% CI	р				
APRI Score ≥2.5	1.83	0.89-3.75	0.099				
SVR-12	0.20	0.09-0.41	0.001				

HCC risk increased linearly by 10% at each 1 point increase in APRI score

Variables included were: gender, HCV genotype, APRI score, Child Pugh stage, DAAs regimens, SVR-12

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HCC in Untrested HCV Patient

HCC in Untreated HCV Patients

LIVER

Natural history of compensated viral cirrhosis: a prospective study on the incidence and hierarchy of major complications

L Benvegnù, M Gios, S Boccato, A Alberti

Gut 2004;53:744-749. doi: 10.1136/gut.2003.020263

Annual Incidence Rate of HCC in <u>Untreated</u> HCV patients: 2.8%

/IRAI HEPATITIS

The Natural History of Compensated Cirrhosis Due to Hepatitis C Virus: a 17-Year Cohort Study of 214 Patients

Angelo Sangiovanni, ¹ Gian Maria Prati, ¹ Pierangelo Fasani, ¹ Guido Ronchi, ¹ Raffaella Romeo, ¹ Matteo Manini, ¹
Ersilio Del Ninno, ¹ Alberto Morabito, ² and Massimo Colombo¹

HEPATOLOGY 2006

Annual Incidence Rate of HCC in Untreated HCV patients: 3.9%

Romano A, et al. 67th AASLD; Boston, MA; November 11-15, 2016; Abst. 19.

