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HEPATITIS B REACTIVATION DURING HEPATITIS C TREATMENT

Oliveira A.¹, Nascimento C.¹, Morão B.¹, Palmela C.¹, Ferreira A.O.¹, Nunes J.¹
1-Hospital Beatriz Ângelo, Department of Gastroenterology, Loures, Portugal.

INTRODUCTION

HBsAg-positive individuals were excluded from clinical trials of direct-acting antivirals (DAA). The alert to the risk of reactivation of hepatitis B virus (HBV) during hepatitis C virus (HCV) treatment was emitted after DAA came into clinical use. In patients HBsAg negative and anti-HBc positive the risk of reactivation appears to be very low.

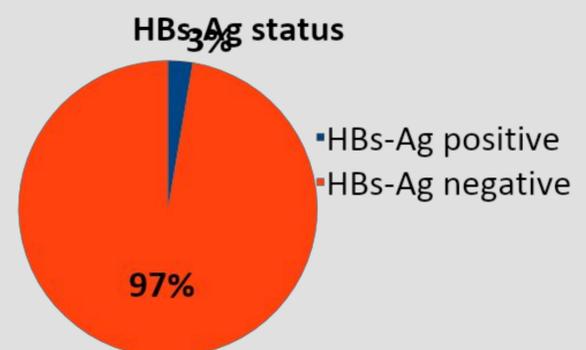
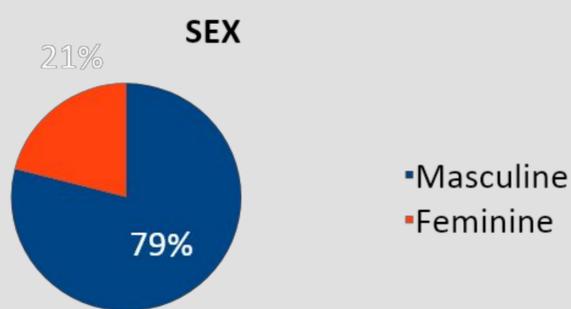
AIMS/METHODS

□ To assess the risk of HBV reactivation during the treatment of Hepatitis C.

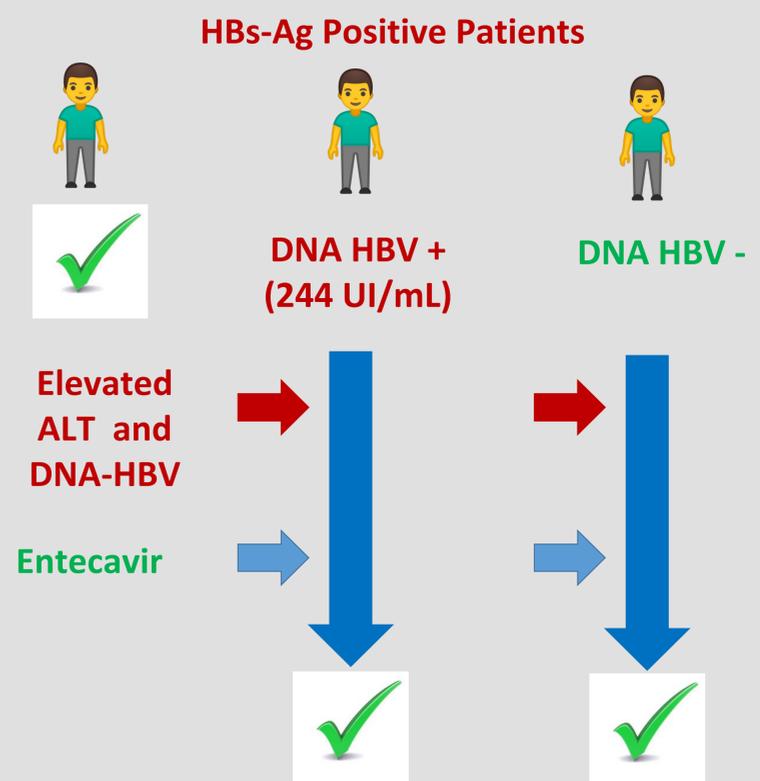
Retrospective study that included all patients with previous contact with HBV who underwent HCV treatment in our hospital from 2012 to 2018.

RESULTS

- A total of 110 patients were identified, 79% were male (n = 87), with a mean age of 50 ± 8 years 107 HBc Ab positive HBsAg negative and 3 HBsAg positive, 56% were positive for anti-HBs Antibody (46/82).
- The HCV treatments used were Ledipasvir / Sofosbuvir (51%), Elbasvir / Grazoprevir (14%), Velpastavir / Sofosbuvir (6%), Glecaprevir / Pibrentasvir (6%), others (23%).



- The median duration of therapy was 12 [8-24]weeks.
- All except 2 patients had sustained virological response.
- None of the patients HBsAg negative and anti-HBc positive had HBV reactivation.
- Of the 3 HBsAg positive patients, there was **HBV reactivation in 2**; these patients were HBeAg negative, HIV negative, HDV negative, with elevated ALT and DNA-HBV levels. One of the cases had detectable viral load (244 IU / mL).
- After the institution of entecavir, both had suppression of HBV viral load.



CONCLUSIONS

- ✓ Our results suggest that HCV patients with **HBsAg negative and anti-HBc positive serology** are a safe population to treat with DAA, with no apparent risk of HBV reactivation.
- ✓ In HBsAg positive patients, the alert for the use of **concomitant prophylactic HBV therapy** is reinforced, since 2 in 3 had reactivation.