Hepatocellular Carcinoma Develops in HIV/HCV Coinfected Patients—Even After Sustained Viral Response

February 14, 2014
By Bishoy Faltas, MD [1]

Hepatocellular carcinoma can develop in HIV/HCV-coinfected patients with a previous sustained virological response with interferon-based therapy. Continued surveillance for HCC with ultrasound examinations in patients with cirrhosis who respond to anti-HCV therapy is recommended.

Hepatocellular carcinoma (HCC) is an important complication of cirrhosis in HIV-infected patients. The incidence of HCC in the HIV/HCV-coinfected population increased 14-fold increase from 2000 to 2009.1

There is significant evidence to show that the incidence of HCC is lower in HCV-infected patients who achieved a sustained virological response (SVR) with interferon (IFN)-based therapy in patients infected only with HCV. However, little is known about the incidence of HCC in HIV/HCV-coinfected patients or the characteristics of patients in whom HCC developed despite eradication of HCV with therapy.

A new study published in the journal AIDS examined the incidence of HCC in HIV/HCV-infected patients.2 This was a retrospective cohort study that included cases of HCC diagnosed in HIV/HCV-coinfected patients in 26 hospitals in Spain before the end of December 2012. The study looked at HCC surveillance patients and anti-HCV therapy received by patients. The investigators identified 182 cases of HCC diagnosed in HIV-infected patients in the participant hospitals during the study period; 167 (92%) of them occurred in HIV/HCV-coinfected patients. Of these patients, 65 (39%) had been treated for HCV before HCC was diagnosed. Interestingly, HCC was diagnosed in 13 cases after SVR was achieved, accounting for 7.8% of the overall cases. The median time from the end of therapy for HCV to diagnosis of HCC was 28 months. There were no major differences in the characteristics of HCC between patients with and without SVR.

Take home message

Primary care physicians need to be aware of the results of this study, which confirm the occurrence of HCC in HIV/HCV-coinfected patients with a previous sustained virological response. The authors recommend continued surveillance for HCC with ultrasound examinations in patients with cirrhosis who respond to anti-HCV therapy.

References

Source URL:
tients%E2%80%94even-after-sustained-viral-response

Links: