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AFP levels predict fibrosis regression after SVR in hep C

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(HealthDay)—For patients with chronic hepatitis C virus (HCV), lower post-treatment α-fetoprotein (AFP) levels and HCV genotype 2 correlate with liver fibrosis regression after sustained virological response (SVR), according to a study published online Dec. 3 in the *Journal of Gastroenterology and Hepatology*.

Yoshihiko Tachi, from the Komaki City Hospital in Japan, and colleagues conducted a retrospective study involving 130 patients with chronic HCV treated with interferon and ribavirin therapy who achieved SVR. All patients underwent a pre-therapy initial biopsy and a second biopsy after achieving SVR to assess the change in fibrosis stage over time (mean time between biopsies, 5.5 years).

The researchers found that fibrosis stage regressed, remained stable, and

progressed in 42.3, 53.1, and 4.6 percent of patients, respectively. There was a significant decrease in the mean fibrosis stage, from 2.01 ± 0.99 units to 1.61 ± 1.24 units (P patients with versus those without fibrosis regression. Significant independent predictive factors for regressed fibrosis after SVR were lower AFP levels at 24 weeks after end of treatment (odds ratio, 4.626; P = 0.006) and HCV genotype 2 (odds ratio, 2.198; P = 0.047).

"Lower post-treatment AFP levels and HCV genotype 2 significantly correlated with liver fibrosis regression after SVR," the authors write.

More information: Abstract
Full Text (subscription or payment may be required)