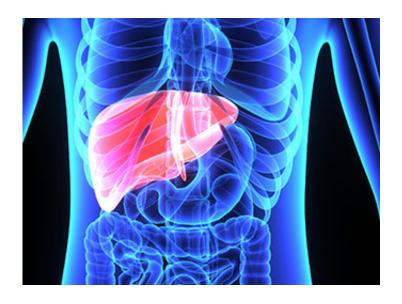


Once hepatitis C viral infection has healed, high-risk portal vein hypertension also diminishes

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Hepatitis C: once the viral infection has healed, high-risk portal vein hypertension also diminishes. Credit: Medical University of Vienna

Hepatitis C viral infection of the liver causes inflexible scar tissue to form. This in turn impedes blood flow through the organ, with resulting hypertension in the portal vein. Portal hypertension is responsible for most of the lethal complications of liver cirrhosis. A research group led by hepatologists Mattias Mandorfer and Karin Kozbial of MedUni Vienna's Department of Gastroenterology and Hepatology have now demonstrated that portal vein hypertension also diminishes once the viral



infection is healed. This is a relief for patients, because it means they can stop taking drugs with unpleasant side-effects and they do not need to undergo stressful check-ups quite as frequently.

Hepatitis C is a common viral infection, which, up until a few years ago, was treated with interferon injections and additional drugs. Recovery rates were poor, particularly in patients with <u>portal hypertension</u> (<u>high blood pressure</u> in the <u>portal vein</u> that carries blood from the gut to the liver), and the side-effects were huge. In Austria today, people are treated directly with anti-viral drugs, which are largely free from side-effects and have a 95% success rate.

Although the hepatitis C virus can no longer be detected in people who have recovered, it was previously not known how reversible cirrhosis, and particularly portal vein hypertension, are. This is an important issue, because portal hypertension can result in bleeding from varicose veins in the oesophagus or the development of ascites, or abdominal dropsy.

The research group headed by Peter Ferenci, Harald Hofer and Markus Peck-Radosavljevic of the Department of Gastroenterology and Hepatology have conducted portal vein pressure measurements on patients who have recovered with interferon-free treatment and, using a new method similar to ultrasound, they have observed that portal vein hypertension diminishes in the majority of patients, so long as hepatitis C has been treated at an early stage. This not only improves their prognosis but is also a relief for patients, because it means they can stop taking medications to prevent the complications of <u>liver cirrhosis</u> and therefore no longer have to put up with their side-effects. It also means that patients do not have to undergo stressful endoscopic check-ups quite as often. Non-invasive ultrasound procedures can prospectively also be used to establish whether portal vein hypertension has diminished in individual patients.



Mattias Mandorfer: "As a general rule, the probability of portal vein hypertension diminishing is greater, the earlier treatment was started. However, despite the promising results, we still strongly recommend that patients attend for check-ups, because portal vein hypertension does not diminish in all <u>patients</u> and, irrespective of whether it does or does not, there is a risk of developing liver cancer as a result of cirrhosis."

More information: Mattias Mandorfer et al. Sustained virologic response to interferon-free therapies ameliorates HCV-induced portal hypertension, *Journal of Hepatology* (2016). DOI: 10.1016/j.jhep.2016.05.027

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