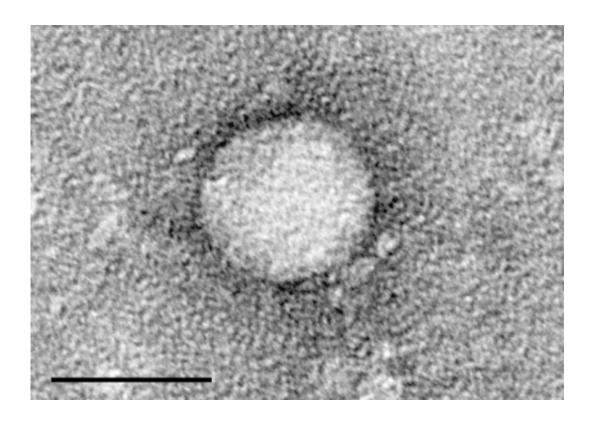


New hepatitis C cases down by almost 70 percent in HIV-positive men in London

March 6 2019



Electron micrographs of hepatitis C virus purified from cell culture. Scale bar is 50 nanometers. Credit: Center for the Study of Hepatitis C, The Rockefeller University.

The researchers behind the study believe that regular screening and improved access to new treatments have contributed to greatly reducing the transmission of the infection. They also believe that if this progress can be maintained London will be on track to achieve the targets set out



by the British HIV Association to eliminate Hepatitis C in HIV patients by 2021.

The results were presented at The Conference on Retroviruses and Opportunistic Infections, a major HIV conference in Seattle, on Wednesday 6 March.

The researchers analysed data of 6,000 HIV positive men at risk of acute hepatitis C at St Mary's Hospital, part of Imperial College Healthcare NHS Trust, the Royal Free Hospital and the Mortimer Market Centre from July 2013-June 2018. As a leading Global Fast-Track City for HIV, London has demonstrated high rates of HIV <u>treatment</u> coverage and success. HIV patients at these centres were given access to regular screening and some were able to access treatment in early infection through academically-led drug trials.

Dr. Lucy Garvey, Consultant in HIV/GU Medicine at Imperial College Healthcare NHS Trust and lead author of the study, said:

"Hepatitis C is a disease that often affects the most marginalised in society. If left untreated it can cause serious liver complications and death. In order to eliminate hepatitis C as a major public health threat we need to reduce the number of people who become newly infected or reinfected with the virus. Our study has shown that greater access to new treatments, closer monitoring and screening can greatly reduce hepatitis C cases, which will lead to better outcomes for the most at risk patients."

Professor Graham Cooke, NIHR Professor of Infectious Diseases at Imperial College London and co-author of the paper, added:

"The results from our study should give us great encouragement as we try to eliminate Hepatitis C. There is a risk that these gains might be reversed if we can't retreat patients and we hope that soon this might be



possible through NHS services."

Hepatitis C is a virus that infects and damages the liver. It is transmitted through blood-to-blood contact or injecting drugs. If left untreated it can lead to scarring of the liver, known as cirrhosis, and liver cancer.

People with HIV who get hepatitis C are more at risk of the disease progressing and they have a higher risk of cirrhosis and liver cancer. Hepatitis C is the leading cause of serious illness and death in people who are HIV/hepatitis C co-infected, attributing to six percent of all deaths.

Since 2016, transformational new treatments have been used to treat infection known as direct acting antiviral tablets (DAA), They are taken as tablets for 8-12 weeks and are highly effective at curing the infection in over 90 per cent of patients. However, under current guidelines, those recently infected with hepatitis C have to wait six months before they can access DAA treatment. Also, if a patient is reinfected with hepatitis C they are not eligible for a second course of DAA, potentially increasing the risk of transmission.

The patients were monitored and screened every six months over the course of the study. The team found that following regular screening and treatment, cases of newly acquired acute hepatitis C have fallen sharply and in 2018 were the lowest recorded in London since 2008 for HIV positive men.

The researchers suggest that more screening, wider prescribing of hepatitis C therapies such as DAA tablets and earlier treatment of acute cases have led to a decline in acute hepatitis C cases. However, the reduction of cases still falls short of the World Health Organisation's target of 90 per cent and reinfections remain high. The team believe that there is an on-going need to promote risk reduction and design



appropriate screening policies for HIV positive men.

The team is expanding the study network to other centres with the ambition of collecting data nationally.

Provided by Imperial College London

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