

Subcirrhotic liver stiffness cuts HCC risk in hepatitis B

10 July 2017



analysis (hazard ratio, 0.485; $P = 0.047$); older age and male gender correlated with increased risk (hazard ratios, 1.071 and 3.704, respectively; both P

"The achievement of sc-LS after AVT can reduce the risk of HCC development in patients with CHB, even when advanced fibrosis or cirrhosis is apparent on starting AVT," the authors write.

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(HealthDay)—For patients with chronic hepatitis B (CHB), achievement of subcirrhotic range of liver stiffness (sc-LS) with antiviral therapy (AVT) is associated with reduced risk of hepatocellular carcinoma (HCC), according to a study published online June 30 in the *Journal of Gastroenterology and Hepatology*.

Byung Seok Kim, from the Catholic University of Daegu School of Medicine in South Korea, and colleagues enrolled 209 patients with CHB-related advanced fibrosis or cirrhosis who received paired transient elastography examinations during AVT between 2007 and 2012. The authors examined whether achievement of sc-LS reduced the risk of developing HCC.

During the study period, the researchers found that after two years of AVT, 67.0 percent of patients achieved sc-LS and 13.4 percent of patients developed HCC. The achievement of sc-LS after AVT was independently correlated with [reduced risk](#) of development of HCC, on multivariate

APA citation: Subcirrhotic liver stiffness cuts HCC risk in hepatitis B (2017, July 10) retrieved 24 April 2021 from <https://medicalxpress.com/news/2017-07-subcirrhotic-liver-stiffness-hcc-hepatitis.html>

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