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Eradication of viral hepatitis

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Statement of the Problem: Hepatitis B and hepatitis C are widely prevalent all over the world and Eradication of these viruses is a challenge. Among the challenges in eradicating these chronic hepatitis viruses, most important aspect is to identify the existing pool of patients and treating them. Once the source of infection (positive patients) is identified and controlled (undetectable viral load), eradication of these viruses is a possibility in near future.

Aim: Eradication of chronic viral hepatitis at IEJA.

Methods: Identified a very high prevalent zone for hepatitis C in the state of Telangana, India. Every individual in the village was screened for hepatitis B and hepatitis C. All patients were consulted by a hepatologist and necessary investigations were done. All patients requiring treatment for hepatitis C were started on antivirals, all their family members and others who were found to be negative for the viruses were counseled regarding the modes of transmission and care to be taken. All the patients who were started on treatment were followed up regularly and compliance on drug intake was monitored. All these patients were tested for SVR (Sustained Virological Response) after 6 months (24 weeks) of completion of Treatment. Repeat screening for hepatitis C in the same village for all the individuals after 7 months did not show any new positive HCV cases.

Results: 300 patients were included in the study. 30 patients were found to be cirrhotics at baseline and antivirals (sofosbuvir+daclatasvir) were given for a period of 24 weeks. Patients with serum creatinine more than 3 mg/dl were excluded. Three patients with HCC were identified and were not included in the study. 227 patients who were non-cirrhotics were treated with a combination of sofosbuvir and daclatasvir for a period of 12 weeks. 40 patients had undetectable HCV RNA at baseline and they were not started on antivirals. Out of 257 patients who were started on antivirals 230 patients achieved SVR.

Conclusion: Prevalence of cirrhosis is about 10% in anti HCV positive population. Incidence of HCC is about 1% in anti HCV positive patients. Treatment with a combination of sofosbuvir and daclatasvir achieved SVR in about 90% population in pangenotypic hepatitis C infection. Identifying positive patients in the community who are the source of infection and treating them effectively with an improved awareness among the general public and close contacts of infected patients can decrease the spread of chronic viral hepatitis and help in eradicating these viruses effectively.

Biography

K S Somsekhar Rao is a well-known gastroenterologist and hepatologist in Apollo Hospitals, Hyderabad, Indi
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