

Better long-term outcomes with low hep C viral load

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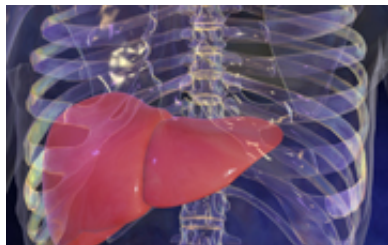


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In patients with hepatitis C virus (HCV)-related hepatocellular carcinoma, low viral load predicts better long-term surgical outcomes, regardless of the serologic eradication of HCV, according to research published in the Feb. 20 issue of the *Journal of Clinical Oncology*.

(HealthDay)—In patients with hepatitis C virus (HCV)-related hepatocellular carcinoma (HCC), low HCV viral load predicts better long-term surgical outcomes, regardless of the serologic eradication of HCV, according to research published in the Feb. 20 issue of the *Journal of Clinical Oncology*.

Junichi Shindoh, M.D., Ph.D., of the University of Tokyo, and colleagues conducted a study involving 370 patients with HCV-related HCC to determine whether HCV viral load impacts the long-term outcomes of HCC after curative surgical resection.

The researchers found that patients with low viral load had a 23.7 percent higher five-year recurrence-free survival rate than those with a high HCV viral load (36.1 versus 12.4 percent). Low viral load was also associated with an 18.9 percent higher five-year overall survival (76.6 versus 57.7 percent). Patients with a high viral load were 87 percent more likely to develop [tumor recurrence](#) compared with low viral load patients. The favorable results obtained in low viral load patients were not dependent on serologic eradication of HCV.

"In conclusion, a low viral load may predict lower recurrence and better survival in patients undergoing hepatic resection for HCV-related HCC irrespective of the serologic eradication of HCV," the authors write. "Postoperative antiviral therapy with individually adjusted intensity and incorporation of direct antiviral agents may warrant prospective study to characterize safety and impact on [recurrence risk](#) in patients undergoing surgical resection for HCV-associated HCC."

More information: [Abstract](#)
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