

Long-term therapy with ETV or TDF demonstrates positive 5-year survival in patients with chronic HBV

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Data revealed today at The International Liver Congress 2015 show that the long-term use of entecavir (ETV) or tenofovir (TDF) results in excellent 5-year survival for Caucasian patients with chronic hepatitis B (CHB), with more than 95% of patients surviving at 5 years and a significant proportion of deaths coming from liver-unrelated causes.

Long-term ETV or TDF therapy is the most common treatment option in CHB of any severity, but efficacy data have been mainly based upon on-therapy virological remission rates. In this 9-centre, large ongoing cohort study, researchers evaluated the survival in Caucasian CHB patients with or without cirrhosis who have been receiving ETV or TDF.

The study analysed 1,815 adult Caucasians with CHB with or without compensated cirrhosis and no hepatocellular carcinoma (HCC) at baseline who received ETV or TDF for at least 12 months.

In the total patient population, the 5-year overall survival rate was 95%, although it was significantly higher in non-cirrhotic (97%) than cirrhotic patients (92%). When only liver-related deaths or liver transplantation were taken into account, the 5-year survival rate was 97.5%.

This study also showed that the development of HCC plays a major role in mortality, which is something that needs to be considered when managing patients with CHB. In multivariable Cox regression analysis,

better overall survival was independently associated with the absence of HCC but not with cirrhosis or gender, while better liver-related survival was associated only with the absence of HCC.

Provided by European Association for the Study of the Liver

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