

# HCC drops beyond five years of entecavir / tenofovir Tx for hepatitis B

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respectively ( $P = 0.050$ ). The yearly HCC incidence rate significantly declined in patients with cirrhosis, but did not differ within and after the first five years in patients without cirrhosis. Beyond year five, all HCCs developed in [patients](#) who were aged older than 50 years at onset of entecavir/[tenofovir](#). In multivariate analysis, older age, lower platelets at baseline and year five, and [liver stiffness](#)  $\geq 12$  kPa at year five correlated independently with more frequent HCC development beyond year five.

"Older age, especially age  $\geq 50$  years, lower platelets, and liver stiffness  $\geq 12$  kPa at year five represent the main risk factors for late HCC development," the authors write.

**More information:** [Abstract](#)

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(HealthDay)—For Caucasian patients with chronic hepatitis B (CHB), the incidence of hepatocellular carcinoma (HCC) decreases beyond year five of entecavir/tenofovir therapy, particularly in those with compensated cirrhosis, according to a study published online June 16 in *Hepatology*.

George V. Papatheodoridis, M.D., Ph.D., from Laiko General Hospital in Athens, Greece, and colleagues examined the incidence of HCC beyond year five of entecavir/tenofovir therapy in a European 10-center cohort study. Data were included for 1,951 adult Caucasian CHB patients without HCC at baseline. Of these, 1,205 without HCC within the first five years of entecavir/tenofovir therapy were followed for five to 10 years (median, 6.8 years).

The researchers found that HCCs were diagnosed in 5.2 and 1.4 percent of patients within the first five years and within five to 10 years, respectively. The annual incidence rate of HCC was 1.22 and 0.73 percent within and after the first five years,

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