

EC GASTROENTEROLOGY AND DIGESTIVE SYSTEM Editorial

# **Hepatitis C Treatment: Current Situation**

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Received: November 28, 2019; Published: December 02, 2019

#### Keywords: Hepatitis C; Treatment; Hepatology

Since the appearance of the first studies with direct antivirals for the treatment of chronic hepatitis C infection, it was shown that these drugs had a very high therapeutic efficacy, greater than 90%. Attending to these results as well as the less contraindications and excellent tolerability, especially when compared with interferon treatments, these drugs represent hope for the cure of a chronic viral infection. Although the brilliant results published in the trial studies were already very encouraging, it is evident that the effectiveness in real life might not be so high, or appear some complications that minimize their therapeutic effect. Attending to the results in real life, it has been shown that they are as good as or even better than those obtained in the registry studies [1-2].

The new drugs have shown that many limitations that were determinants in the antiviral response with interferon treatments, such as HIV infection or lack of prior response to treatments, are not response limiting and that only advanced liver disease and genotypes such as types 3 and 1a may result in a significant reduction in response, but often clinically irrelevant [3]. When European and USA results are compared, the latter showing a slightly lower efficacy than those published in Europe [1], which may be possible due to loss of follow-up rather than the absence of a viral response, or withdrawal of treatments due to adverse effects. The issue of the adverse effects of these drugs, not being null, also seems to be minimally relevant and only appear more frequently in patients with advanced liver injury, where some of these drugs have limited use.

The appearance of resistance to antiviral drugs, despite the ability to mutate the virus, seems very low considering that the absence of a virological response is not always a consequence of the emergence of resistance [4]. Therefore, although this eventuality poses important challenges in the treatment of patients who have developed it, its importance from the point of view of therapeutic efficacy seems relative and more when the appearance of new antiviral drugs or combinations of them seem to offer very favorable therapeutic alternatives.

Another important issue is the possibility of serious complications secondary to the treatment. The large series show that these eventualities in terms of serious complications that determine abandonment of the treatment or vital risk are minimal [5]. However, it does seem, from experience, that when they occur they develop in patients with advanced liver injury or due to certain interactions with other drugs taken by the patient.

In recent months, two issues of relative importance have been established with these drugs. One of them is that when the lesion is very advanced, the therapeutic benefit due to improved survival and quality of life is questionable. Current data suggest that in the case of very advanced disease, the therapeutic benefit of the elimination of the C virus is unimportant, but we do not know the limit of liver function determining this situation [6]. The second question is whether or not treatment with these drugs may favor the development of

*Citation:* Eduardo Esteban-Zubero and Cristina García-Muro. "Hepatitis C Treatment: Current Situation". *EC Gastroenterology and Digestive System* 7.1 (2020): 01-02.

liver cancer in patients with cirrhosis due to C virus in which a virological response has been achieved. The issue is open to discussion but it seems likely that in patients with cirrhosis without hepatocellular carcinoma, the risk of developing a tumor appears to be slightly modified, and that if there is an increased risk of recurrence after tumor treatment [7].

Finally, the question of the cost-effectiveness of these drugs is an aspect that is totally open to discussion, but it seems clear that treatment with liver disease in stages 2, 3 and 4 is not questionable. The cost-effectiveness in patients with minimal degrees of fibrosis is determined by the high cost of the drug, although the benefits of eradication of the virus at the liver and extrahepatic level should be considered together and therefore if a reduction in the cost of drug itself or by use for less time, these parameters of cost effectiveness can be very modified with regard to the treatment in all stages.

In summary, current direct antivirals and those that come in the near future constitute a therapy of such brilliant results that they have practically never been seen in Medicine and will allow with a correct policy of its use, although not eradicating the C virus, because there is no vaccine, it does reduce its incidence and prevalence to a minimum with the important health benefits.

#### **Conflict of Interest**

Any financial interest or any conflict of interest exists.

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