

Cirrhosis Increasing Among Hepatitis C Patients, According to Large US Study

The past decade has seen a nearly 40 percent increase in the prevalence of cirrhosis among people with hepatitis C in the U.S., a new study found. The reasons remain uncertain, however.

The study, titled "[Hepatitis C Complications: Prevalence and Disparities in a Large US Cohort 2006-2014](#)" (abstract #180) was presented at [The Liver Meeting 2016](#), held by the [American Association for the Study of Liver Diseases](#) (AASLD).

Cirrhosis has long been linked to hepatitis C, but to what extent had been uncertain. To find out, a team led by Stuart C. Gordon, MD, and others analyzed the prevalence of cirrhosis; decompensated cirrhosis — the development of jaundice, ascites, variceal hemorrhage, or hepatic encephalopathy — and the incidence of death among 11,169 American hepatitis C patients between 2006 and 2014.

The team assessed the annual change in percentage between several different points in time to identify trends in prevalence.

Cirrhosis was found to be more prevalent among hepatitis C patients in 2014, when it was at 28.5 percent, than in 2006 (20.5 percent), with the highest increase seen from 2006 to 2007.

The prevalence of decompensated cirrhosis varied according to the age of patients and increased by about 2 percent a year, but the increase was seen only in patients over age 60. It remained fairly steady in younger patients.

The study also showed that deaths nearly doubled in these patients from 2006 to 2013, from 1.7 percent to 3.2 percent. Most of the increase was seen before 2010, however.

"Previous estimates had suggested that the medical burden of chronic hepatitis C and its complications would increase in the U.S. given the aging of the population, including the 'baby boomer' cohort born between 1945 and 1965 who are at the highest risk for infection," Gordon, director of hepatology at the Henry Ford Health System in Detroit, said in a [press release](#).

Gordon and his research team aimed to discover if it was true that HCV-related cirrhosis and its complications were on the rise, and if so, whether there were disparities among different populations. The reason for this, he said, is to better target treatment for those who might have a higher risk of poor outcomes.

The analysis was part of a larger study of viral hepatitis in the U.S. called the [Chronic Hepatitis Cohort Study](#) (CHeCS). Gordon and his team considered patients who were receiving care at four broad U.S. healthcare systems participating in the CHeCS study. They looked at liver biopsy reports and serum markers of liver scarring, among others, to identify cirrhosis development.

"The present analysis confirms the rising burden of chronic hepatitis C infection and its complications on the U.S. healthcare system," Gordon concluded. "These rising rates may have leveled off in recent years, however, possibly related to better options for treating HCV infection."

"Future studies will help determine whether increased uptake of these newer medications can help stem the tide of HCV disease progression," he added.