No Link Between Hep C Treatment With DAAs and Liver Cancer Risk

Any previous apparent link between direct-acting antivirals, compared with interferon, and liver cancer was likely driven by other factors.

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Direct-acting antiviral (DAA) treatment for hepatitis C virus (HCV) does not apparently raise the risk of hepatocellular carcinoma (HCC, the most common form of liver cancer) compared with interferon treatment, Healio reports. Previous reports of such a link between DAAs and liver cancer were likely biased by differences in baseline risk factors for liver cancer between those treated with interferon versus DAAs.

Regardless of treatment type, treating hep C is indeed associated with a lower risk of liver cancer.

Publishing their findings in the journal Hepatology, researchers studied a cohort of 17,836 people with hep C drawn from the ERCHIVES database. The individuals had been treated with interferon or DAAs or were not treated. A respective 66.6 percent and 96.2 percent of those treated with interferon and DAAs achieved a sustained virologic response 12 weeks after completing therapy (SVR12, considered a cure).

During an average follow-up of 7.4 years for those treated with interferon and 1.08 years for those treated with DAAs, a respective 196 and 50 individuals were diagnosed with liver cancer.

Among all those treated for hep C, neither the liver cancer diagnosis rate nor the liver-cancer-free survival rate differed significantly based on whether an individual was treated with DAAs versus interferon. Looking just at those with cirrhosis, the study authors found that individuals who went untreated for hep C had a significantly higher liver diagnosis rate compared with those who were treated with either interferon or DAAs. Additionally, both groups of treated individuals had a significantly lower risk of developing liver cancer compared with untreated individuals.

To read the Healio article, click here.

To read the study abstract, click here.

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