

New Drug Candidate Reverses Metabolic Liver Disease and Fibrosis

EVT0185 has shown promise against MASH fibrosis and liver cancer in preclinical studies.

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Researchers at McMaster University are leading preclinical studies into a novel drug candidate developed by [Espervita Therapeutics](#) that has the potential to prevent and reverse liver fibrosis—a dangerous, disease-induced build-up of scar tissue in the liver that often leads to cancer.

The findings point to a potential new treatment for the millions of people living with liver disease, addressing a critical gap where no approved drugs currently exist in Canada. The promising results were published in January 2026 in the journal [Cell Metabolism](#).

[Editor's note: Two medications, [Rezdiffra \(resmetirom\)](#) and [Wegovy \(semaglutide\)](#) are approved in the United States for metabolic dysfunction-associated steatohepatitis.]

Liver fibrosis is a late-stage symptom of a disease called metabolic dysfunction-associated steatohepatitis (MASH), which most often presents in people living with obesity or other metabolic conditions, like type 2 diabetes.

In addition to cancer, liver fibrosis can contribute to heart attack and stroke and can ultimately require liver transplantation. But despite the severity of these outcomes, researchers say that treatment options for MASH and other liver diseases remain limited.

“Currently, we have no drugs approved in Canada to treat MASH,” explains [Greg Steinberg](#), a professor in McMaster’s Department of Medicine and lead author of the research. “Right now, patients are typically prescribed a Mediterranean diet and some lifestyle and exercise recommendations, but no specific medical interventions have been approved in Canada. And while two therapies have recently received approval in the U.S. and E.U., these agents have only been shown to reduce fibrosis in only about one-third of patients.”

Steinberg, an executive member of [NexusHealth](#) at McMaster, says that while the current treatment paradigm can, in *some* cases, slow the progression of liver disease, it generally does not reverse fibrosis-related damage that has already occurred. But, according to the early preclinical data, a new drug candidate characterized in his lab as part of a research collaboration with Espervita Therapeutics *does*.

In the study, Steinberg’s research team—in collaboration with researchers from the United States, France, and Australia—demonstrated in disease models the powerful curative and restorative effects of a novel small-molecule therapy.

The drug candidate—developed by Espervita Therapeutics, where Steinberg is chief scientific officer, shareholder, and co-founder—is being evaluated through a research partnership with McMaster University, where scientists have shown that it can help control blood sugar levels, reduce cholesterol, and destroy fat build-up that causes liver fibrosis.

The compound, EVT0185, was [first described](#) as a potential treatment for liver cancer, after its promising anti-tumor activity was detailed in a paper published in the prestigious journal [Nature](#). And while it still holds great promise as a cancer therapeutic, this recent discovery shows that it also holds promise as a potential treatment option for MASH.

“There’s a huge unmet need for agents that reduce liver fibrosis and also have a positive effect on blood glucose and cholesterol,” says Steinberg, who co-directs the [Centre for Metabolism, Obesity, and Diabetes Research](#) at McMaster. “This drug candidate addresses a major therapeutic gap and has the potential to fundamentally change how we treat severe liver disease and, in turn, prevent liver cancer and other complications, including diabetes and heart disease.”

The new small molecule, which simultaneously targets two enzymes critical for controlling fat synthesis and fat burning called ACLY and ACSS2, triggers what Steinberg describes as a “carbon release valve” in the body, which stops harmful matter from accumulating in the liver and bloodstream and instead diverts it out of the body via urine.

Steinberg says the new multi-use compound is on track to be in clinical trials by 2027, pending a final slate of preclinical and toxicology work.

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