

Viread Improves Survival for People With Hepatitis B After Liver Cancer Surgery

People treated with Viread after liver resection had improved overall survival and delayed cancer recurrence compared to those who used Baraclude.

May 6, 2024 By [Sukanya Charuchandra](#)

People who were treated for [hepatitis B](#) with the antiviral Viread (tenofovir disoproxil) after surgery for liver cancer lived longer and were less likely to experience cancer recurrence than those treated with Baraclude (entecavir), according to study findings published in [JAMA Network Open](#).

Over years or decades, chronic hepatitis B virus (HBV) infection can lead to liver fibrosis, [cirrhosis](#) and hepatocellular carcinoma (HCC), the most common type of [liver cancer](#). [Antiviral therapy](#) can keep hepatitis B virus replication suppressed, but it usually does not lead to a cure, so long-term treatment is usually necessary. Viread and Baraclude are often used as a first-line antiviral treatment, but their comparative benefits for people with liver cancer are not well understood.

Pengpeng Li, MD, of the Eastern Hepatobiliary Surgery Hospital in China, and colleagues conducted a study to analyze survival rates among people with HBV-related liver cancer after resection who were treated with either Viread or Baraclude.

This retrospective cohort study included 4,451 people with HBV-related HCC who received a resection (partial liver removal) with curative intent between January 2015 and December 2018. Most (85%) were men, and the average age was 58 years. After liver resection, 989 received Viread and 3,462 received Baraclude. For their analysis, the researchers matched two groups with 989 participants each.

Over a median follow-up period of 51 months, overall survival (OS) rates for the study population were 92% at one year, 73% at three years and 59% at five years. During the same period, recurrence-free survival (RFS) rates were 85%, 53% and 47%, respectively.

People treated with Viread had significantly higher OS and RFS rates than those who used Baraclude, especially with longer follow-up. OS rates were 91% at one year, 75% at three years and 64% at five years for Viread recipients, compared with 92%, 71% and 54%, respectively, for Baraclude recipients. Similarly, RFS rates were 85% at one year, 56% at three years and 51% at

five years for Viread recipients, compared with 84%, 50% and 43% for Baraclude recipients.

“This cohort study found that among patients with HBV-related HCC who underwent liver resections with curative intent, tenofovir disoproxil was associated with significantly better OS and RFS rates compared with entecavir on long-term follow-up but not in short-term follow-up,” wrote the researchers. “Tenofovir disoproxil could be considered the preferred long-term antiviral treatment for these patients.”

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