

# Treatment and follow up of HCV-related liver disease.

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# Hepatitis Registry

# Hepatitis Registry – pre-authorization

- Paper based since year 2001
- Data collected in excel since 2006
- Web based since 2011
- Pre-authorization of all HCV treatments in Hungary
- Tracks all treatments
- Viral and Fibroscan results can be taken directly from labs

# Hepatitis Registry – HepReg

- Data protection (GDPR)
- Owned by the Hungarian Gastroenterology Society
- Developed from eCRF, sponsored by the Liver Foundation, unrestricted grants
- Health insurance, pharmacists, and viral labs see all relevant data for them
- Usage was voted on „consensus meeting” by all physicians treating hepatitis B and C

# HepReg functions

- E-Referral
- Pharma companies financing PCR's
- SVR – outcome based financing
- „Fast track” for health care workers
- Automatic check-ups for data consistency, choice of therapy, length of treatment
- Reminders for missing data (EOT+24)
- (Waiting list – Priority index)

# Diagnosis

# Dg: As easy as possible

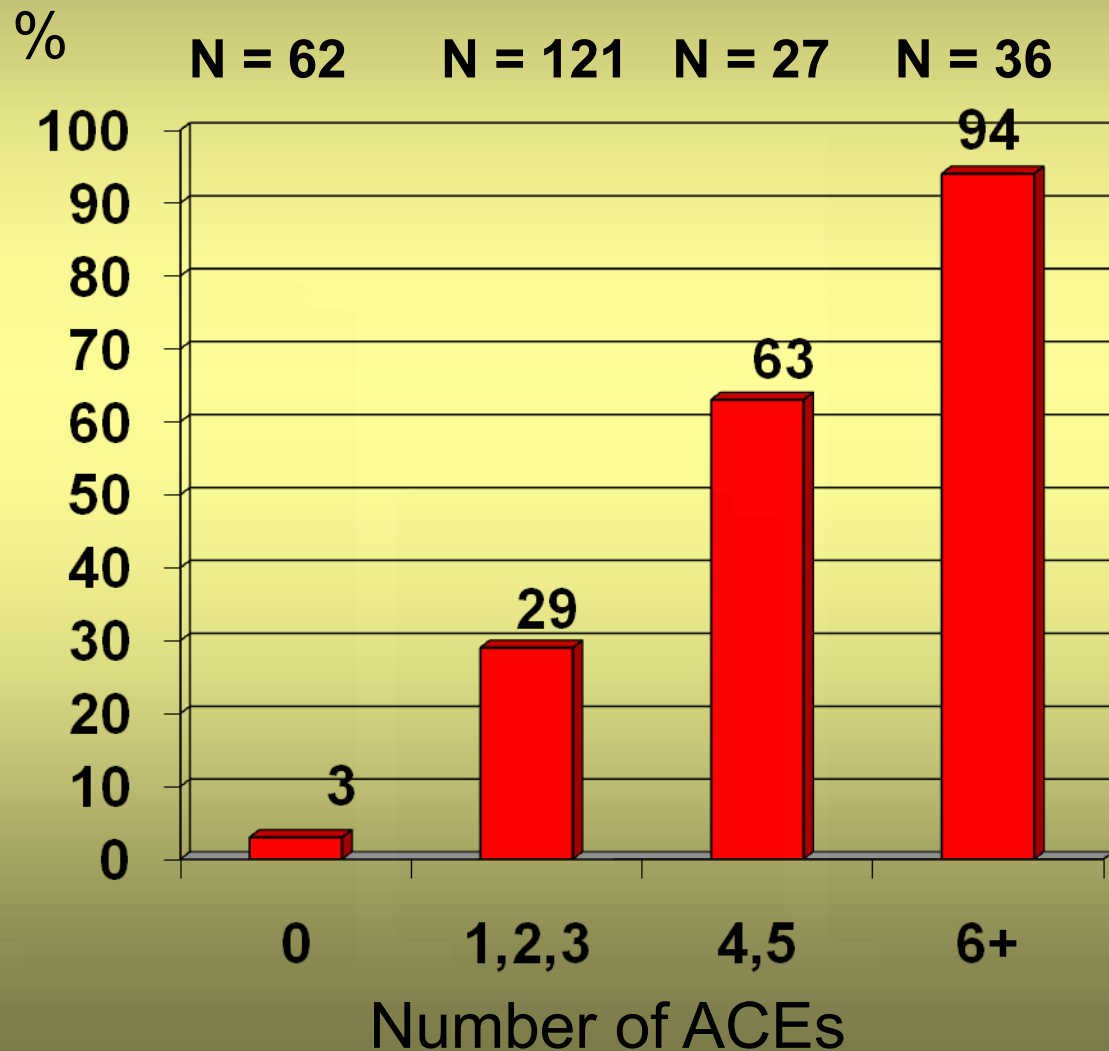
- Basic lab. values
  - HCV RNA rtPCR
  - HCV genotype
  - Fib4 or ELF or elastography
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- If no venous access HCV RNA from fingerstick is enough.

# For PWID

- Adverse childhood experiences are considered and treated
- Social security is often missing



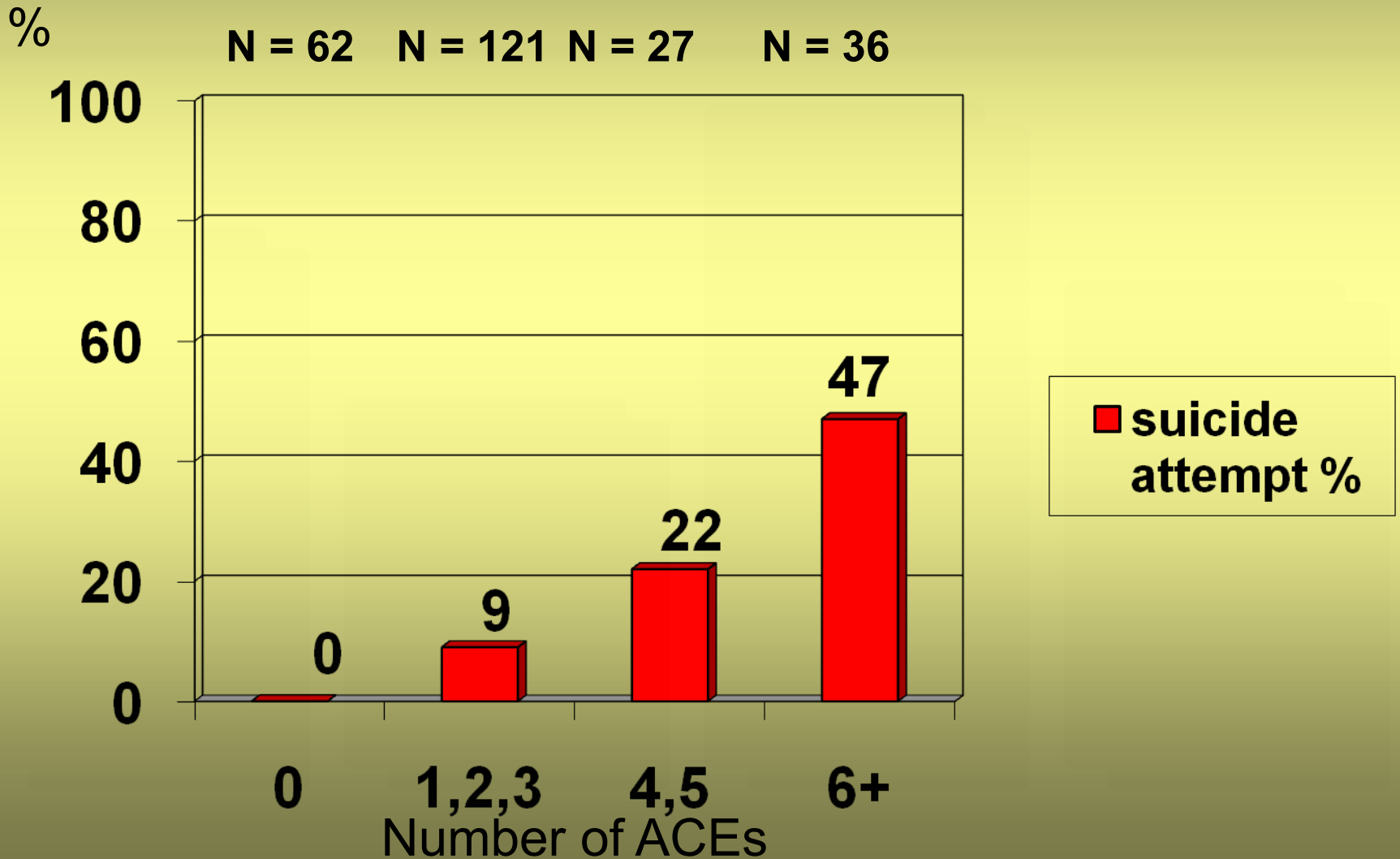
# ACE-IQ (13 categories) serious adverse childhood experiences points and percentage of addicted patients (N = 246)



■ Addicted patients %

Odds ratio  
0 versus 6+ ACE =  
**29,3**

ACE-IQ (13 categories) serious adverse childhood experiences points and percentage with previous suicide attempt (N = 246)



Treatment & follow up

# Treatment: According to label with some modifications

- All treatments are available (G/P and SOF/VEL/VOX on „personal basis”
- In GT3 comp. cirrhosis: RBV is added to SOF/VEL
- For NS5a+NS5b failures 16 weeks of G/P can be used
- Hungarian guideline recommendations are similar to EASL guideline

# Special groups

- Acute HCV: IF PCR positive after 8-12 weeks.
- Child C: personalized decision.
- HCC: priority for treatment.
- PWID: no restrictions for treatment.
- Treatment in institutions (incl. prisons):  
Priority.

Screening, diagnosis, treatment, and follow up of hepatitis C virus related liver disease. National consensus guideline in Hungary from 20 Sep. 2019

# Follow up

- On treatment: No strict recommendation
- SVR 24 is only checked (recommended SVR 12)
- Long term follow up: F3/F4 at least every 6 months ultrasound
- If HCC or failed DAA: at least every 3 months ultrasound in the 1. year.

# Conclusions

- Diagnostic methods: According to EASL guideline
- HepReg: no waiting list, well controlled treatment with 97% SVR.
- Ultrasound follow up for F3/F4

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- **Thank you for your attention**