Steatosis in chronic hepatitis B and its impact on the therapeutic response to entecavir

H.Chaabouni, I.Bougharriou, N. Lachiheb, K.Mnif, T.Ben Jemaa, K.Rekik, F.Smaoui, M.Koubaa, C.Marrakchi, B.Hammami, M.Ben Jemaa

Infectious Diseases Department, Hedi Chaker University Hospital, University of Sfax, Tunisia

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BACKGROUND:

- Steatosis has been clearly reported during alcohol intake, excess weight and viral hepatitis C.
- This has not been sufficiently studied in chronic hepatitis B (CHB).
- We aimed to determine the prevalence of steatosis during CHB treated with entecavir (ETV) and its impact on virological response.

RESULTS:

- In total, 233 patients were collected.
- The mean age was 38 ± 10 years .
- **Sex ratio** (M/F)=2.6
- The prevalence of steatosis (Figure 1)

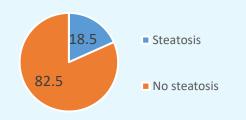


Figure1: The prevalence of steatosis

PATIENTS AND METHODS:

- A retrospective descriptive study.
- Including CHB patients treated with ETV.
- Hospitalized in an infectious diseases department
- Between 2009 and 2019.
- The population was divided into:
 - ✓ G1 (with steatosis).
 - ✓ **G2** (without steatosis).

Clinically:

- G1 patients were older (38 vs 35 years, p = 0.03).
- The presence of steatosis was not associated with:
 - ✓ Gender (p=0.2)
 - ✓ Diabetes (p=0.2)
 - ✓ Alcohol consumption (p = 0.3).

Biologically:

- Thrombocytopenia: more observed in G1 (20% vs 6%, p = 0.03).
- Cytolysis: found in both groups (p=0.4).
- Cytolysis was greater than 3 times the upper limit of normal in 32.5 % of cases.
- The virologic response to ETV:
- **Complete** in both groups regardless of the presence of steatosis or not. In fact, its rate reached 79% in G1 and 80% in G2 (p = 0.6).

CONCLUSION:

- Despite the young age of the patients and the absence of diabetes, steatosis was common.
- The role of hepatitis B may be suggested.
- Steatosis do not influence the progression of fibrosis or the response to therapy.