

Conclusions: In our experience, 69.9% of the patients were successful extubated on the first day after liver transplantation. There were no differences between the tracheal extubation time and MELD score in our patients. There is a trend to reduce mechanical ventilation time after liver transplantation to facilitate early discharge from the ICU, reducing costs and optimizing resources. Our experience shows that early post-transplant extubation is safe, optimizing available resources.

Time on mechanical ventilation	Nro	%	MELD average (interval)
< 1 day	146	69.9	21 (10 - 41)
1 - 3 days	31	14.8	20 (10 - 40)
3 - 7 days	26	12.4	22.2 (13 - 31)
>7 days	6	2.9	24.3 (15 - 40)

<https://doi.org/10.1016/j.aohep.2021.100449>

P-87 HIGH PREVALENCE OF SARS-COV-2 ANTIBODIES IN PREGNANT WOMEN INFECTED WITH VIRAL HEPATITIS IN BRAZIL

Alanna Calheiros Santos, Vanessa Saete de Paula, Juliana Custódio Miguel, Elisangela Ferreira da Silva, Laura Cristina Machado Pinto, Lia Laura Lewis-Ximenez, Livia Melo Villar

Viral Hepatitis Laboratory, Oswaldo Cruz Foundation, Rio de Janeiro, Brazil

Introduction: Pregnant women are considered more vulnerable to viral infections, such as severe viral respiratory infections and viral hepatitis. Data about Brazilian pregnant and postpartum women found a case fatality rate of 12.7% among COVID-19 Acute Respiratory Distress Syndrome cases (ARDS). Studies in pregnant women found prevalences of antibodies (Ab) against SARS CoV-2 between 4 to 14% in Europe and North America. However, there is no data about the prevalence of SARS CoV-2 Ab among Brazilian pregnant women with viral hepatitis.

Objectives: The objective of this study was to assess the prevalence of SARS CoV-2 antibodies in pregnant women infected with hepatitis B or C.

Methods: A total of 31 pregnant women (21 HBV and 10 HCV) were recruited in Rio de Janeiro (Brazil) from January 7, 2020 to January 11, 2021. The study protocol was approved by the Brazilian National research ethics committee. Serum samples were collected and tested for total antibody (Ab) and IgM Abs specific for SARS-CoV-2 using electrochemiluminescence assay (Elecsys Anti-SARS-CoV-2, Roche).

Results: Pregnant women were at first (n=12), second (n=10) and third trimester of gestation (n=9). None of them had diabetic or are living with HIV, while three women presented arterial hypertension. Mean age was 30.6±7.26 years old, 90.3% were black and 38.7% had up 8 years of education. Total anti-SARS-CoV-2 prevalence was 19.3% (6/31). Most of pregnant women were at first trimester of gestation, aged less than 35 years of old, and were black race. However, none of these variables were statistical associated to anti-SARS CoV-2 antibody positivity (table 1).

Conclusions: This is the first report of SARS CoV-2 seroprevalence in pregnant women infected with viral hepatitis, where seroprevalence appears to be greater than that observed in pregnant women

without liver disease in the same period.

Table 1. Characteristics of pregnant women infected with viral hepatitis according to the anti-SARS CoV-2 testing.

	Anti-SARS CoV-2			p-value
	Positive (n=6) n/N (%)	Negative (n=25) n/N (%)	Total N = 31	
Maternal Age				
<35 years	4/6 (66.7%)	16/25 (64%)	20	1.000
≥ 35 years	2/6 (33.3%)	9/25 (36%)	11	
Gestational Trimester				
First	3/6 (50%)	9/25 (36%)	12	0.65
Second	1/6 (16.7)	9/25 (36%)	10	
Third	2/6 (33.3%)	7/25 (28%)	9	
Race				
Black	6/6 (100%)	22/25 (88%)	28	1.000
Caucasian and others	0/6 (0%)	3/25 (12%)	3	
Scholarly				
Up to Elementary School	3/6 (50%)	9/25 (36%)	12	0.66
Secondary School and higher	3/6 (50%)	14/25 (56%)	17	
No information	0/6 (0%)	2/25 (8%)	2	

<https://doi.org/10.1016/j.aohep.2021.100450>

P-88 EVALUATION OF STEATOSIS AND LIVER FIBROSIS IN PATIENTS WITH PSORIASIS: THE IMPACT OF METHOTREXATE AND METABOLIC FACTORS ON THE SEVERITY OF THE DISEASE

Luciana Agoglia^{1,2,3}, Ana Carolina Cardoso¹, Nathalie Leite C.¹, Maria Chiara Chindamo¹, Cristiane A. Villela-Nogueira¹

¹ *Hepatology Unit, Hospital Universitário Clementino Fraga Filho, Federal University of Rio de Janeiro*

² *Gastroenterology Unit, Hospital Universitário Antônio Pedro, Federal University Fluminense*

³ *Department of Internal Medicine, Federal Hospital of Bonsucesso*

Introduction: Methotrexate (MTX) is a crucial treatment drug in Psoriasis. Its impact on the development of liver fibrosis has been questioned since a high prevalence of non-alcoholic fatty liver disease has been described in this disease.

Objective: To assess, in Psoriasis patients, the associated factors for liver steatosis and advanced fibrosis diagnosed by transient hepatic elastography (THE).

Methodology: This was a cross-sectional study in Psoriasis patients. Chronic liver diseases, use of steatogenic drugs (except MTX), and alcohol intake >20–30 g/day (women/men) were excluded. Demographic, anthropometric, clinical, and laboratory data were registered as well as time since psoriasis onset and cumulative MTX doses. THE cutoff points ≥7.9KPa (probe M) and ≥7.2KPa (probe XL) were considered for the diagnosis of advanced liver fibrosis and CAP values ≥248 dB/m for the diagnosis of steatosis. Logistic regression analysis was performed, and the significance level was 0.05.

Results: 141 patients were included (42.6% male, 53.7±12.4 years old, body mass index [BMI] 29.3±5.9 kg/m²). The prevalence of Diabetes Mellitus (DM), Metabolic Syndrome, Systemic Arterial Hypertension (SAH), and dyslipidemia was 28.4%, 55.3%, 57.4% and 73.7%, respectively. Overall, 67.4% had steatosis by CAP and 16.3% had advanced fibrosis by THE. Median time since psoriasis onset was 121.1 months (69.5–234.1). MTX cumulative dose ≥1000mg was found in 47.8% (median 2212.5mg [1360–3213.70]). In the regression analysis, BMI (OR 1.25 95% CI 1.12–1.38; p<0.001) and triglyceride

levels (OR 1.01 95% CI 1.01-1.02; $p=0.002$) were the only variables independently associated with steatosis. DM (OR 4.8 95% CI 1.6-14.3; $p=0.005$) and SAH (OR 11.6 95% CI 2.2-61.1; $p=0.004$) were associated with advanced fibrosis.

Conclusion: On a cohort of patients with Psoriasis, metabolic variables were the main factors related to liver steatosis and fibrosis. There was no association between cumulative MTX dose or disease duration and liver steatosis or fibrosis in this population.

<https://doi.org/10.1016/j.aohep.2021.100451>

P-89 ASSESSMENT OF HEPATIC FIBROSIS IN TYPE 2 DIABETIC PATIENTS: A CROSS SECTIONAL ANALYSIS

Mincis Rodrigo¹, Altikes Renato Gama¹, Vanni Denise Siqueira¹, Rossi Da Maria Elizabeth², Zitteli Patrícia Momoyo¹, Carrilho Flair José¹, P. Oliveira Claudia¹, Pessoa Mario Guimarães¹

¹ Division of Gastroenterology and Hepatology, Hospital das Clinicas, University of São Paulo School of Medicine

² Department of Endocrinology, Hospital das Clinicas, University of São Paulo School of Medicine

Introduction: Metabolic dysfunction associated fatty liver disease (MAFLD) was suggested recently as a more appropriate nomenclature to describe the liver disease associated with known metabolic dysfunction. Type 2 Diabetes is a risk factor for MAFLD, steatohepatitis and patients are at increased risk to developing liver fibrosis and need to be more investigated.

Aim: To investigate which MAFLD patients with type 2 diabetes have higher risk for advanced fibrosis.

Methods: Patients in diabetes clinic, without known hepatic diseases and without significant alcohol intake (< 21 drinks per week), were voluntarily selected to perform liver ultrasound, liver stiffness and CAP measurements using Fibroscan (Echosens, Paris, France) and serological tests for B and C hepatitis to exclude viral causes of liver disease. Subjects were submitted to a complete clinical examination and laboratory tests.

Results: 90 patients were included in this cross-sectional analysis. Overall, 12,2% (11 patients) had advanced fibrosis (liver stiffness > 8,7 Kpa) and 23% (21 patients) had severe steatosis (Grade 3 steatosis; CAP> 290 db/m) based on transient elastography. Factors associated with significant fibrosis were age over 60 years old, alanine amino transferase (ALT) elevation, low HDL (lower than 40), triglycerides elevation, higher BMI and severe steatosis.

Conclusion: Prevalence of advanced fibrosis and severe steatosis in patients with type 2 diabetes and MAFLD is very high (12,2% and 23% respectively), what makes screening of these high-risk patients very important. Risk factors such as elevated glycated hemoglobin, higher BMI, triglycerides, ALT and CAP measurements on Fibroscan and low HDL indices are considered to be associated to advanced liver fibrosis.

<https://doi.org/10.1016/j.aohep.2021.100452>

P-91 PREVALENCE OF HEPATITIS C VIRUS INFECTION DETECTED BY RAPID TEST IN A HIGH-RISK POPULATION

Pedro Montes Teves¹, Briny Rodriguez Vargas¹, Jaime Bustamante Flores¹, Eduardo Monge Salgado¹

¹ Hospital Nacional Daniel Alcides Carrión – Callao

Introduction: Hepatitis C virus testing is recommended in selected populations based on demography, prior exposures, high-risk behaviors, and medical conditions. In Perú, screening usually is based on anti-HCV detection using enzyme immunoassays (EIA), but rapid diagnostic tests are an attractive alternative to facilitate screening.

Aim: To determine the prevalence of Hepatitis C infection diagnosed by a rapid antibody detection test in a high-risk population.

Methods: A Cross-sectional descriptive study. Patients attending the G-I unit of the Daniel A. Carrión National Hospital - Callao- Peru who had risk factors for HCV infection in the period September-November 2018 were included, after informed consent, a HCV Hepa-Scan antibody detection rapid test (Bhat Bio-tech India) was performed.

Results: Ninety two patients were included, 56.5% were men and 43.5% women, age average was 52.02 +/- 17.53 years old. The risk factors identified in this population were: past history of major surgery: 35 (38%), Tattoos 28 (30.4%), transfusion 17 (18.5%), drug use 8 (8.7%), healthcare worker 5 (5.4%), inmates 4 (4.3%), HIV infection 2 (2.2%), hemodialysis 1 (1.1%), high risk sexual behavior 1 (1.1%). Twenty nine patients (31.5%) had hypertransaminasemia. One case of Hepatitis C infection (1.1%) was detected, confirmed with serological test and RNA HCV viral load; the risk factor was past history of major surgery.

Conclusion: The prevalence of HCV infection detected by rapid antibody test in a population with risk factors was 1.1%.

<https://doi.org/10.1016/j.aohep.2021.100454>

P-93 PREVALENCE OF HEPATITIS E VIRUS IN DIFFERENT GROUPS OF PATIENTS IN SALVADOR, BA, BRAZIL

G. Lopes^{1,5}, C. Correia², D. Almeida³, S. Cunha⁴, S. Pacheco⁴, V. Nunes⁴, J. Cotinguiba⁴, D. Lima², M.S. Campos¹, R. Paraná⁴, M.I. Schinoni⁴

¹ Universidade Federal da Bahia Curso de Pós-graduação

² Universidade Federal da Bahia Curso de Graduação

³ CEDAP, Secretaria de Saúde de Salvador

⁴ Hospital Universitário Professor Edgard Santos, Universidade Federal da Bahia

⁵ Instituto de Ciências da Saúde, Universidade Federal da Bahia

Introduction: Few studies have been published to assess the prevalence of HEV in our country.

Objective: To determine the prevalence of HEV in patients with hepatitis C virus (HCV), hepatitis B virus (HBV), autoimmune hepatitis (HAI) and in patients with drug-induced liver injury (DILI).

Materials and Methods: This is a cross-sectional study. A total of 300 volunteers were recruited at the Magalhães Neto Ambulatory, HUPES. Detection of anti-HEV antibodies was determined using the Mikrogen® ELISA (RecomWell anti-HEV IgG, Mikrogen®, Germany). Descriptive statistics was used.

Results: 46% (138/300) had HBV, 35.3% (106/300) HCV, 12.3% (37/300) HAI and 6.3% (19/300). The prevalence of anti-HEV IgG was 12.43%, after stratification of patient groups we observed a prevalence of anti-HEV IgG of 13.7% in patients with HCV, 12.9% of HBV, 6.7% of HAI and 21%. The means of TGO and TGP among patients VHE negative were 60.5 and 65.7 IU / mL, respectively, while the mean among those seropositive for HEV were 75.8 and 104.9 IU / mL, respectively, demonstrating an increase in the levels of TGO and TGP among HEV positive people. The mean TGP among DILI patients was 993.3 IU / mL and TGO was 641.4 IU / mL. Fibrosis staging among