

### Treatment with nucleoside and nucleotide analogues in patients with chronic hepatitis B virus infection

CA González Rodríguez, A Bautista Santos, R Moreno Alcántar

Specialty Hospital. Centro Médico Nacional Siglo XXI. Mexico City, Mexico. Instituto Mexicano del Seguro Social, (IMSS)

**Introduction and Objective:** This study aimed to compare the efficacy of treatment with entecavir (ETV) and tenofovir (TDF) in patients with chronic hepatitis B infection.

**Material and Methods:** Cross-sectional, descriptive, retrolective study. Realized in the "Hospital de especialidades Siglo XXI". We included patients >18 years with chronic hepatitis B infection in treatment and follow-up from January 1st, 2015, to March 1st, 2021. Descriptive statistics were performed and to show differences Wilcoxon test was used. Approved by the institutional ethics committee and informed consent was obtained.

**Results:** We included 33 patients, male gender predominated in 51.5% (17), mean age was 59 years (+/- 11.25). Co-infected with HIV were 18% (6). Median baseline viral load was 2500,00 (3940 – 191500,000 copies/ml). Median baseline APRI 0.3 (0.2-1.6) and FIB-4 1.33 (1.0-2.2). Exposure to previous treatments was 45.8% (16). The mean follow-up was 9.48 years (+/-4.82). Current treatment TDF 60.6% (20), ETV 27% (9). Incidence of hepatocellular carcinoma occurred in 3% (1). At 6 and 12 months of treatment, 69% and 64% (16/23 and 16/28), respectively, with undetectable viral load. There was a difference in baseline APRI compared to current  $p < 0.05$ ; there was no difference in APRI throughout treatment.

**Discussion:** Treatment is effective for HBV both in chronic infection and liver cirrhosis, maintaining viral suppression with low seroconversion rates and low incidence of hepatocellular carcinoma.

**Conclusion:** Treatment with nucleotide and nucleoside analogues is effective for the suppression of the hepatitis B virus.

**Funding:** The resources used in this study were from the hospital without any additional financing

**Declaration of interest:** The authors declare no potential conflicts of interest.

<https://doi.org/10.1016/j.aohep.2022.100827>

### Spontaneous elimination of the Hepatitis C virus at the CMN la Raza specialty hospital

AY Cruz Saucedo, GD Salazar-Hinojosa, G. Morales-Osorio, V. Rodríguez-Granados, C.M. del Real Calzada, M.T. Rizo-Robles

Specialty Hospital, Antonio Fraga Mouret. National Medical Center La Raza. Instituto Mexicano del Seguro Social (IMSS), Mexico

**Introduction and Objectives:** This study aimed to estimate risk factors for viral exposure in patients with spontaneous elimination of HCV in the Hepatitis clinic of CMN La Raza.

**Materials and Methods:** Retrospective, observational, descriptive, cross-sectional and single-center study. Records of patients with antibodies against HCV determined by third-generation ELISA from July 2017 to February 2020 were reviewed; those that did not have sufficient information to carry out the analysis were eliminated, patients with the positive anti-HCV test were selected, confirmatory test with HCV PCR detectable by Abbot's real-time PCR. Risk factors for exposure to HCV and demographic data were collected. The results were

analyzed with measures of relative frequencies and obtaining percentages, mean and average.

**Results:** Sixty patients (12.4%) with undetectable anti HCV+/PCR were included; 22 were men (35%) and 40 were women (65%), mean age of 54.4 years. Risk factors for exposure to HCV were: surgery (90%), transfusions (37%), dental interventions (10%). None presented a clinical picture suggestive of viral hepatitis. Associated comorbidities: systemic arterial hypertension (25%), Diabetes mellitus 2 (14%), obesity (8%).

**Conclusions:** All the patients studied had risk factors for exposure to HCV, as reported in the literature. A higher frequency of spontaneous elimination of HCV was found in the female gender. All patients with an anti-HCV+ test must undergo an HCV RNA test to confirm infection and start antiviral treatment since the spontaneous elimination of HCV is low.

**Funding:** The resources used in this study were from the hospital without any additional financing

**Declaration of interest:** The authors declare no potential conflicts of interest.

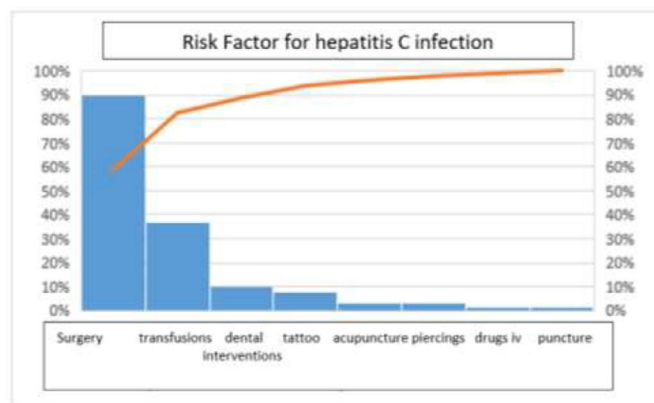


Figure 1.

<https://doi.org/10.1016/j.aohep.2022.100828>

### Incidence and risk factors of Chronic Viral Hepatitis type C in persons deprived of their liberty in the Social Rehabilitation Center (CERESO) of the state of Veracruz

MT Guzmán Terrones<sup>1</sup>, M Alfaro Centeno<sup>2</sup>, LÁ Cortez Lara<sup>3</sup>, IM Pérez Acosta<sup>4</sup>

<sup>1</sup> Hepatitis C Clinic. High Specialty General Hospital of Veracruz. México

<sup>2</sup> Cristóbal Colon University. México

<sup>3</sup> Medical Service de la Dirección General de Prevención y Reinserción Social

<sup>4</sup> Instituto Seguridad y Servicio Sociales de los Trabajadores del Estado (ISSSTE). Mexico

**Introduction and Objectives:** People deprived of liberty (PPL) is a key population for the elimination of chronic viral hepatitis c (VHC) by 2030, according to the WHO. The objective of our work is to know the incidence of the prison population in the 17 social rehabilitation centers (CERESO) of the state of Veracruz.

**Material and Methods:** A descriptive, cross-sectional, observational study was carried out in the 17 CERESOS of the state of Veracruz at 6466 PPL, by means of dry blood test screening. APRI/FIB-4 index, glomerular filtration rate, sexual orientation, HIV, BMI and comorbidities were determined.

**Results:** The incidence of VHC in PPL was 0.6% (36 patients); 100 were men. 100% were found without HIV. 69% of PPL reported being users of intranasal or intravenous psychoactive substances (UDIS) 61% had piercings and/or tattoos. 80.6% reported not having a school education or did not mention it, and only 14% had completed primary school. The population with the highest risk comprised the age range between 30 and 39 years (49%). According to APRI, only 14% were staged F3. Only one patient presented F4. Figure 1.

**Conclusions:** The incidence of PPL in the CERESOS of the state of Veracruz is below that observed in the world literature on the prison population. The low incidence could be explained by having the PPL that declared consumption of 0.4% of having been UDIS, compared to other CERESOS in the north of the country. The presence of VHC was observed in CERESOS with a population of 400 PPL and without the presence of VHC in CERESOS with a population of fewer than 100 PPL, a factor could be overpopulation.

**Funding:** The resources used in this study were from the hospital without any additional financing

**Declaration of interest:** The authors declare no potential conflicts of interest.

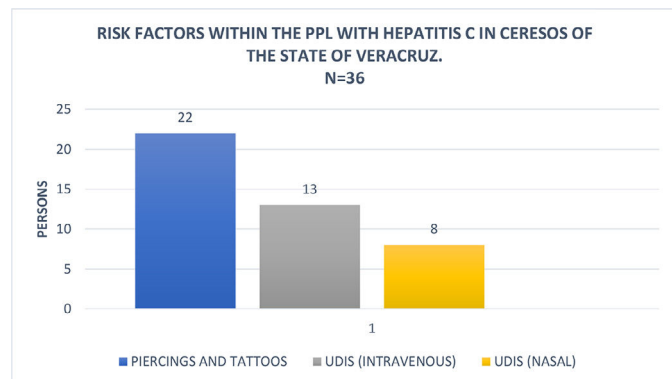


Figure 1.

<https://doi.org/10.1016/j.aohep.2022.100829>

### Detection of Hepatitis C and risk factors in the general population of the Centro Médico Nacional La Raza

GD Salazar Hinojosa, G Morales-Osorio,  
MT Rizo-Robles, AY Cruz-Saucedo,  
CM del Real Calzada

Specialty Hospital Antonio Fraga Mouret. Centro Médico Nacional La Raza. Instituto Mexicano del Seguro Social (IMSS). Mexico City, Mexico

**Introduction and Objective:** Detection of hepatitis C virus (HCV) infection is effective because there is an effective treatment. In Mexico, a seroprevalence of 1.4% is reported for the population, with the main risk factors being transfusion of blood products and unprotected sexual intercourse. This study aimed to detect anti-HCV and risk factors in La Raza National Medical Center.

**Material and methods:** Observational, longitudinal and descriptive study. A survey of risk factors was applied to the general population, signing informed consent, and a capillary sample was taken to determine anti-HCV with rapid immunochromatographic tests with colloidal gold for qualitative detection. Data were expressed as means, frequencies and percentages.

**Results:** 279 tests were performed. There were 175 women (62.7%) and 104 men (37.2%), and the average age was 44.3 years. The risk factors were: unprotected sexual contact (n=141, 50.5%),

presence of piercings or tattoos (n=86, 30.8%), accidents with sharp material (n=67, 24%), contact with catheters or endoscopes (n=52, 18.6%), sharing razor blades or toothbrushes (n=38, 13.6%), multiple sexual contacts (n=35, 12.5%), contact with HCV-positive patients (n=27, 9.6%), transfusions before 1995 (n=17, 6%), STDs (n=14, 5%), intranasal drug use (n=8, 2.8%), sexual drug use (n=5, 1.7%) and others (n=19, 6.8%). None was reactive. Figure 1.

**Conclusions:** No anti-HCV reactive cases were detected. The risk factor, unprotected sexual intercourse, is the main one and the second is the presence of tattoos and piercings, but this did not influence the prevalence.

**Funding:** The resources used in this study were from the hospital without any additional financing

**Declaration of interest:** The authors declare no potential conflicts of interest.

## RISK FACTORS IN THE GENERAL POPULATION

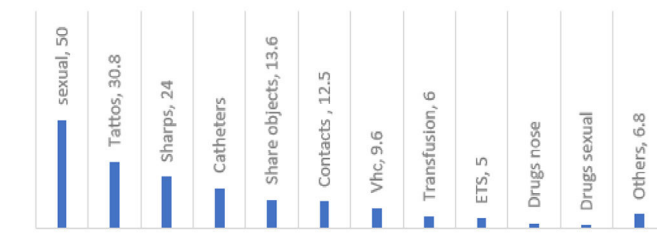


Figure 1.

<https://doi.org/10.1016/j.aohep.2022.100830>

### Metabolic-associated fatty liver disease (MAFLD) is not associated with bone mineral density (BMD) alterations in Mexican women: a cross-sectional study

GN López-Sánchez<sup>1,2,3</sup>, N Martínez-Zavala<sup>1,2,3</sup>,  
P Alberti-Minutti<sup>1,2,3</sup>, A Vergara-Lopez<sup>1,2,3</sup>,  
N Chavéz-Tapia<sup>1,2,3</sup>, M Uribe<sup>1,2,3</sup>,  
N Nuño-Lámbarri<sup>1,2,3</sup>

<sup>1</sup> Translational Research Unit. Medica Sur Clinic Foundation Mexico

<sup>2</sup> National Medical Center "20 de noviembre" Mexico

<sup>3</sup> Medica Sur Clinic Foundation Mexico

**Introduction and Objective:** This study aimed to determine the association between bone mineral density (BMD) and metabolic-associated fatty liver disease (MAFLD) in Mexican women through a cross-sectional study at a specialized medical center in Mexico City.

**Material and methods:** Data on cardiovascular risk factors were obtained; transient vibration-controlled elastography (VCTE) and dual-energy X-ray absorptiometry (DEXA) were performed. Patients were divided according to the presence or absence of MAFLD, according to the controlled attenuation parameter (CAP). The correlation test between T-score and CAP values was calculated to analyze the relationship between bone mineral density and MAFLD; additionally, the correlation between MAFLD vs. low BMI was determined and the risk ratio was calculated.

**Results:** MAFLD prevalence of the women enrolled was 63.33% osteopenia and osteoporosis were present in 43.3% and 6.7%, respectively; the bone mineral density (T-score) of the lumbar spine, hip and femur does not show statistical differences between the groups