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Retrospective Cohort Study

Spleen stiffness mirrors changes in portal hypertension after successful interferon-free therapy in chronic-hepatitis C virus patients

Ravaoli F *et al.* Spleen stiffness measurement and PH after DAAs

Federico Ravaoli, Antonio Colecchia, Elton Dajti, Giovanni Marasco, Luigina Vanessa Alemanni, Maria Rosa Tamè, Francesco Azzaroli, Stefano Brillanti, Giuseppe Mazzella, Davide Festi

Abstract

AIM

To investigate changes in spleen stiffness measurements (SSMs) and other non-

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Abstract

POSTER PRESENTATIONS

hepatic and neurologic disease in 27.3%, exclusive neurologic disease in 5.7%. In patients with hepatic WD, 30.3% had compensated and 14.2% decompensated liver cirrhosis (LC), 50% chronic hepatitis, and 5.3% acute liver failure. In patients with hepatic and neurologic impairment, 66.6% had compensated and 11% decompensated LC and 22.2% chronic hepatitis. Exclusive hepatic disease was encountered in 77.7% of children in comparison to only 50% of adults ($p=0.02$). At last follow-up visit, treatment consisted in D-penicillamine 32.1%, trientine 8.3%, zinc 5.9%, D-penicillamine and zinc 41.7%, trientine and zinc 3.6%, liver transplantation being performed in 8.4% of cases. In patients with hepatic disease, clinical improvement was established in 65.8% of patients while worsening of disease in only 20.3%. In patients with hepatic and neurologic disease, clinical improvement was found in 59.1%, while worsening in 22.7%. Patients with isolated neurological impairment had a favorable clinical course in 75% of cases and the rest worsened. Liver stiffness measured in all patients with compensated liver diseases at the moment of diagnosis decreased significantly after 12 months of chelating therapy (14.6 ± 10.9 vs 8.4 ± 5.1 kPa, $p < 0.0001$).

Conclusion: In a romanian tertiary center, WD with hepatic phenotype is the most frequently encountered especially in children and exclusive neurological disease is rare. A favorable disease course could be confirmed in >60% of cases in all phenotypes, with significant decrease of liver stiffness. During the study period, liver transplantation was performed in <9% of cases due to timely diagnosis and effective chelating therapy.

The results of the LSM according to time spent after food-intake are illustrated in the Table 1 below:

Table 1: Results of LSM by 2D SWE SSI

	Fasting	30 minutes after food intake	1 hour after food intake	2 hours after food intake
Mean LSM (kPa)	4.8 ± 0.8	5.0 ± 0.8	5.1 ± 0.7	4.9 ± 0.8
P		0.25	0.07	0.56

Conclusion: Food-intake did not significantly increase liver stiffness values obtained by 2D SWE SSI method in healthy subjects.

SAT-106

Spleen stiffness decrease as mirror of portal hypertension changes after successful interferon-free therapy in chronic-HCV patients

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Background and Aims: Interferon-free direct-acting antivirals (DAAs) have enormously increased the number of patients with advanced chronic liver disease (ACLD) achieving sustained viral

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