INTRODUCTION

Italy has one of the highest prevalence rate of HCV infection in Europe, and HCV infection is the leading cause of cirrhosis, HCC, and liver-related deaths. Nevertheless, epidemiologic studies estimating the real prevalence, and severity of HCV related liver disease in the general Italian population were conducted during the years 1994-2006, in small towns or communities.

The introduction of the new DAAs for hepatitis C, whose use is expected to have a deep impact in terms of eradication HCV and long-term morbidity and mortality, makes urgent the need to obtain representative real-life and long-term data on the HCV infected population, above all considering the high costs of these drugs and the need to adopt treatment priority rules to maximize cost-effectiveness.

The prospective Italian HCV cohort study, known as PITER, benefits from a structured network involving Italy’s National Institute of Public Health (Istituto Superiore di Sanità), the Italian Society for the Study of the Liver (AISF), the Italian Society for Infectious Diseases (SIMFI), and their affiliated clinical centers.

RESULTS

To date, the PITER-HCV cohort consists of 8590 enrolled patients in care in more than 80 Italian Clinical Centers distributed on the overall Italian area (Fig 2). In this analysis, data of 7275 patients with complete data entry were considered.

- Genotype distribution is as follows: Genotype 1a-44%; Genotype 1b-22%; Genotype 2-13%; Genotype 3-3%; Genotype 4-8%. Genotypes 1a, 1b and 4 are significantly more frequent among younger patients while Genotypes 2 and 3 are significantly more frequent among older patients.

- Among treatment naïve patients, fibrosis distribution is: F0-F1:46%, F2:14%, F3:11%; F4/cirrhosis:29%.

- Among treatment experienced patients, the fibrosis distribution is: F0-F1:32%, F2:15%, F3:13%; F4/cirrhosis:40%.

- As reported in Tab.3, in 4282 patients for whom transient elastography data were available, fibrosis distribution in the first and the second periods of enrollment which are similar and for the main aims of the PITER study. The enrolled patients will be followed up for about at least 5 years, independently if they will be undergone an anti-HCV antiviral therapy.

CONCLUSIONS

PITER cohort constitutes a well representative sample of patients with chronic HCV infection in care in Italy.

- Enrolled patients have an advanced age and 56% are male.

- Co-morbidities are present with a prevalence between 3-32%.

- F4/cirrhosis is diagnosed in about 40% of patients.

- Genotype distribution is significantly more frequent among older patients.

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REFERENCES

2. Piter Collaborating Group available on www.iss.it/piter