GENDER DIFFERENCES IN HCV CHRONIC LIVER DISEASE: A REAL LIFE EVALUATION IN PITER COHORT STUDY


BACKGROUND and OBJECTIVES
Chronic hepatitis C and liver fibrosis progress more rapidly in men and menopausal women (who are also resistant to IFN-bantiviral) than in fertile women.

A cohort of patients with chronic HCV infection care has been consecutively enrolled in the Italian Platform for the Study of Therapies of Chronic Viral Hepatitis named PITER. We assessed the role of gender on the severity of HCV chronic liver disease in a real life perspective of 7492 consecutive patients enrolled in the PITER framework over the last 12 months.

MATERIALS & METHODS
In this cross sectional analysis we aimed to describe sociodemografic (age), clinical (fibrosis stage, and comorbidities), and virological (HCV RNA genotype) characteristics of patients according to the gender. Differences in proportions were evaluated by chi-square test. The independent role of gender, age, BMI, HCV genotype, alcohol, and comorbidities in the severity of liver disease were evaluated by logistic regression analysis.

RESULTS

Of enrolled patients, 3317 (44%) were female. These were older (mean age 62±12 vs. 58±13 years) and less prevalent 13% (33%) than males (p<0.05). Genotype (Gt) 1 (70% and 64%) and 2 (20% and 14%) were more prevalent in females compared to Gt 3 (15% vs 7%) and 4 (10% vs 3%) which were more prevalent in males.

CONCLUSIONS
Females younger than 50 years had significantly lower fibrosis compared to men, however risk of cirrhosis in females increased significantly in women older than 60 years. DAA therapies should therefore be made available to females before occurrence of menopause considering the high rate of cirrhosis in women older than 60 years of age.

REFERENCES

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