

Liver dynamics of HCV infection amongst patients aged 50 years or older visiting a larger tertiary care centre of Hyderabad, Pakistan

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Background & Aims: Usually chronic infection of hepatitis C virus (HCV) is asymptomatic until present as acute hepatitis, acute liver failure or development of cirrhosis with decompensation. New era of Direct-acting antiviral (DAAs) for HCV has evolved the treatment with good result and tolerability. Early diagnosis and treatment can halt the further disease progression.

Method: In this cross sectional study, all the patients with HCV positive either acute or chronic hepatitis infection, cirrhosis with or without decompensation, aged 50 year or above, of either gender, presenting in the outpatient department (OPD) were included.

Results: A total of 281 patients were enrolled during the study period. Mean age of the study population was 56.91 ± 7.21

years (range: 50-90 years) and majority were male (51.6%) and with Child class A 136 (48.4%) followed by child class B 96(34.2%). Majority of patients presented as decompensated cirrhosis and raised transamines 160 (56.9%). Most common complication was variceal bleed 95 (33.8%) followed by ascities 88 (31.3%), pedal edema 24 (8.5%). More than half of the patients were not eligible for treatment. Correlation between age and gender with liver stage and comorbidities was statically significant ($p=0.001$).

Conclusion: Late diagnosis present with complication with least options of treatment. Chronic hepatitis C is curable disease and should be diagnosed as early as possible. There should be screening at younger age.