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Summary

NONTUMORAL PORTAL VEIN THROMBOSIS IN PATIENTS WITH HEPATITIS C VIRUS AND SUSTAINED VIROLOGICAL RESPONSE - A FURTHER CHALLENGING CONSEQUENCE OF LIVER CIRRHOSIS

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A prospective cohort study of 730 HCV cirrhosis patients treated with direct-acting antivirals found a 4.8% prevalence of nontumoral portal vein thrombosis after sustained virological response.

KEY POINTS

- Among 730 patients with HCV-related liver cirrhosis treated with DAAs in Romania between 2016 and 2021, 35 patients (15 men, 20 women, mean age 57.86 years) developed non-malignant portal vein thrombosis after sustained virological response.
- The mean time from sustained virological response to portal vein thrombosis was 290 days, with 71.4% of affected patients having received ledipasvir/sofosbuvir and 28.6% having received paritaprevir/ritonavir, ombitasvir and dasabuvir.
- Improvement in Child-Pugh and MELD scores was observed at sustained virological response, with slight deterioration at 48-week assessment showing increased proportion of patients in Child B class and MELD ≥ 15.
- Pro- and anticoagulant factor evaluation showed the classic hemostatic profile of liver cirrhosis with portal vein thrombosis: increased FII, FVIII and FvW, and decreased PC, PS, and ATIII.

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