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Summary

URSODEOXYCHOLIC ACID THERAPY IN PATIENTS WITH PRIMARY BILIARY CHOLANGITIS: PREDICTORS FOR INCOMPLETE RESPONSE

Zahi Ismaili

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A 10-year cohort study of 50 primary biliary cholangitis patients found that 28-34% showed incomplete response to ursodeoxycholic acid according to Paris criteria, with poor adherence, overlap syndrome, and hepatocellular carcinoma identified as non-response predictors.

KEY POINTS

- Incomplete response to ursodeoxycholic acid occurred in 28% of patients by Paris I criteria and 34% by Paris II criteria
- Non-response predictors included poor therapeutic adherence in 14% of cases, overlap syndrome in 6%, and hepatocellular carcinoma in 4%
- The cohort comprised 50 patients with mean age 52.74 years at diagnosis, 92% female, with 82% having positive anti-mitochondrial antibodies
- Median liver transplantation-free survival was reported as 10% at 5 years, 7.38% at 10 years, and 5% at 15 years
- The authors conclude that early identification of patients at risk of incomplete response could improve management and prognosis

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