

Krooniline C-hepatiit ja HIV Kas murekoht?

Eesti Arstide Päevad 2017

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Lääne-Tallinna Keskhaigla Nakkuskliinik



Väljahõigatud numbrid

- Maailmas on 130-150 M kroonilise HCVga inimest (2-2,5% üldpopulatsioonist)
- 10 M HCV positiivset narkomaani
- Maailmas on 35 M HIV+
 - HCV koinfektsiooni 25-30%
 - Kim 2013, Peters 2014, Rockstroh 2005, Chew 2016
 - HBV koinfektsiooni 5-20%
 - Konopnicki 2005, Soriano 2013
- Euroopas MSM seas HCV levimus 4-8%
 - Dante 2007, Schmidt 2011

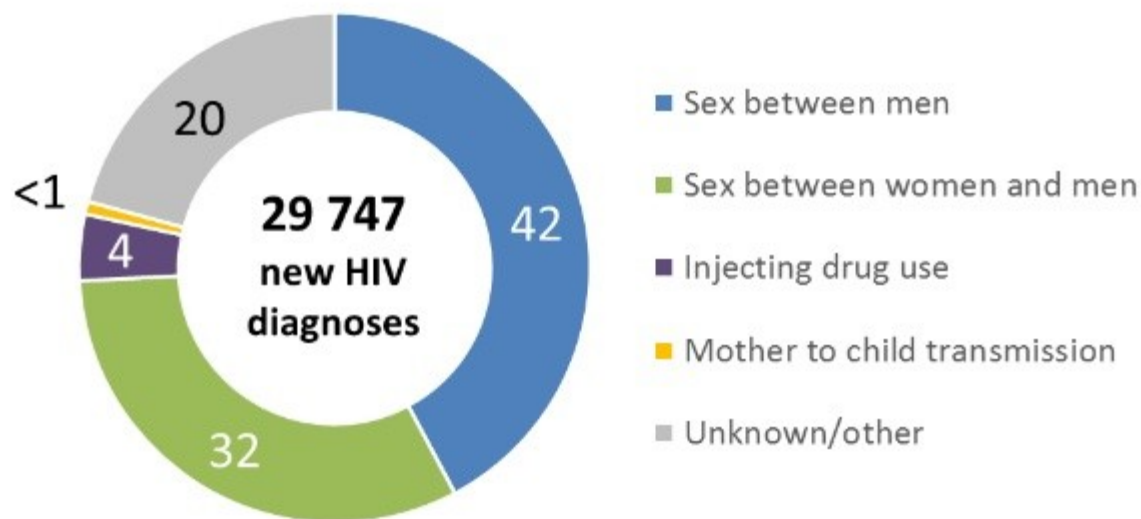
HIV/HCV vajaks kiiremat ravi

- Koinfektsioonil maksa fibrootiliste protsesside progressioon ca 2x kiirem kui HCV monoinfektsioonil
 - HCV monoinfektsioon 30-40 a
 - HIV/HCV 10-20 a
 - Kõrgem HCV RNA
 - Halvem ravivastus PegIFN+ ribaviriinile
 - Tsirroosi kiirem dekompanseerumine
 - HCC kõrgem risk, agressiivsem kulg

Kaasaegne HCV ülekanne

- Narkomaania
- MSM
 - Chemsex
 - Parenteraalsed mõnuained
 - Intranasaalsed mõnuained
- Organtransplantatsioon
- Hemodialüüs
- Heteroseksuaalne monogaamia < 0,01%

Percentage of HIV diagnoses, by route of transmission, 2015, EU/EEA



Reported HIV transmission modes in the EU/EEA, 2015



Source: ECDC/WHO (2016). HIV/AIDS Surveillance in Europe, 2015

Unknown mode of transmission is excluded from proportions presented here. 5

WHO

3.3 The global targets for 2020

45. *Global targets:* Countries have an opportunity to take a decisive leap towards ending their AIDS epidemics – if they act swiftly and with resolve. The global targets apply to everyone: children, adolescents, and key populations. Tracking new HIV infections is a key indicator of the overall goal of ending the AIDS epidemic.

HIV-related deaths:

- reduce global HIV-related deaths to below 1 million per year;
- reduce tuberculosis deaths among people living with HIV by 75%;
- reduce hepatitis B and C deaths among people coinfecting with HIV by 10%, in line with mortality targets for all people with chronic hepatitis B and C infection.

Testing and treatment:

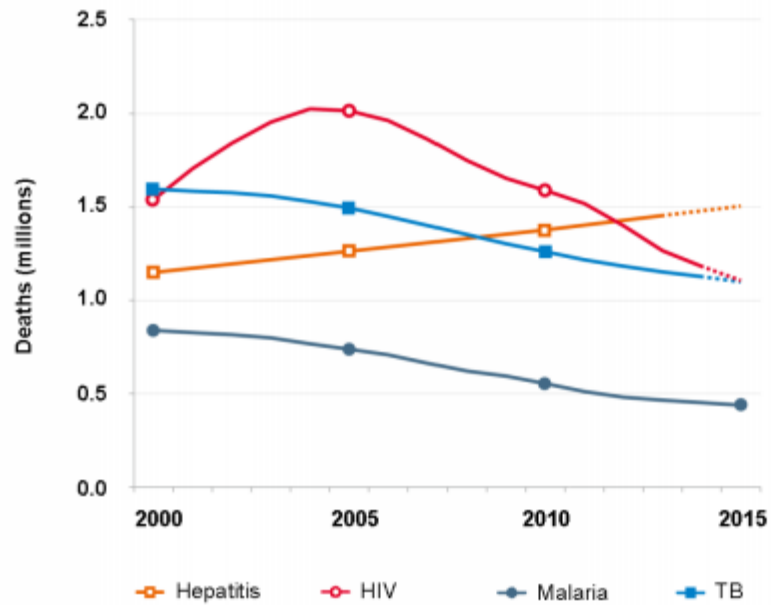
- ensure that 90% of people living with HIV know their HIV status;
- ensure that 90% of people diagnosed with HIV receive antiretroviral therapy;
- ensure that 90% of people living with HIV, and who are on treatment, achieve viral load suppression.



HIV (ja HCV) parim preventsioon on ravi

WHO

Figure 2. Estimated global number of deaths due to viral hepatitis, HIV, malaria and TB, 2000–2015



Source: Global Burden of Disease and WHO/UNAIDS estimates, see <http://ihmeuw.org/3pms>, <http://ihmeuw.org/3pmt> (accessed 2 April 2016).




Koinfektsiooni ravi komistuskivid






- Kontingent
- Raha
- Ravimite koostoimed
 - <http://www.hep-druginteractions.org/checker>

<http://www.hep-druginteractions.org/checker>




-  Do Not Coadminister
 -  Potential Interaction
 -  Potential Weak Interaction
 -  No Interaction Expected
 -  No Clear Data
- Do Not Coadminister Potential Interaction Potential Weak Interaction No Interaction Expected No Clear Data

Results Key

	OBV/PTV/r + DSV
Emtricitabine	
Raltegravir	
Tenofovir-DF	

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Results Key

	Elbasvir/Grazoprevir
Abacavir	
Raltegravir	
Ribavirin	

HCV Advisor

EASL 2017

- Mitmes erinevas keeles
- Patsiendi andmed
 - fibroosi aste, genotüüp, NS5A polümorfism, eGFR, kehakaal, varasem ravi
- Ravivalikud
 - sh riigist/rahakotist sõltuvad
 - DDI
- Väljatrükk patsiendi jaoks



Iga infektsioon võib käivitada ahelreaktsiooni Mida on võimalik ravida, seda tuleb ravida ASAP

HIV on raviga edukalt kontrollitav.

HCV on väljaravitav.

HBV on vaktsineerimisega välditav.

Ilmselt ei toimu nende viiruste täielikku
väljajuurimist enne minu pensioneerumist.

TÄNAN TÄHELEPANU EEST!