

Characteristics of individuals receiving hepatitis B treatment in Ethiopia: 18-month follow up

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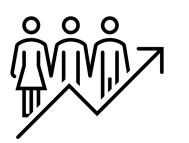
Introduction

- Hepatitis B virus (HBV) infection is a major risk factor for **hepatocellular** carcinoma (HCC) in Africa
- It has higher morbidity and mortality in part due to disparities in access to viral treatment

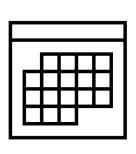


• We aimed to identify characteristics of individuals who were treated versus untreated for HBV in Ethiopia.

Methods



We identified HBsAg positive patients in a referral clinic in Addis Ababa, Ethiopia starting in January 2020.



Clinical, laboratory and demographic data were obtained during clinic visits at baseline, 6, 12, 18 months, and recorded in REDCap.

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	Results	
50 patients	51 treated	99 untreated
Male	86% (n=44)	75% (n=74)
ledian age	35 (IQR 29-46)	34 (IQR 28-41)
her education	56% (n=17)	42% (n=27)
ledian AST	36 (IQR 27-56)	27 (IQR 22-36)
ledian ALT	32 (IQR 21-39)	26 (IQR 20-38)
HBV DNA	25, 921 (IQR 3,162-178,430)	389 (IQR 102-1,816)
Ascites*	43% (n=22)	5% (n=5)
normal U/S*	60% (n=29)	20% (n=18)
APRI	0.54 (IQR 0.37-1.51)	0.31 (IQR 0.21-0.46)
^ FIB4	1.79 (IQR 0.86-2.65)	0.85 (0.51-1.28)
Coffee use*	90% (n=28)	70% (n=45)
obacco use	0% (n=0)	0% (n=0)
Alcohol*	0% (n=0)	5% (n=5)
🧷 Khat	0% (n=0)	9% (n=6)
significant p<0.05		

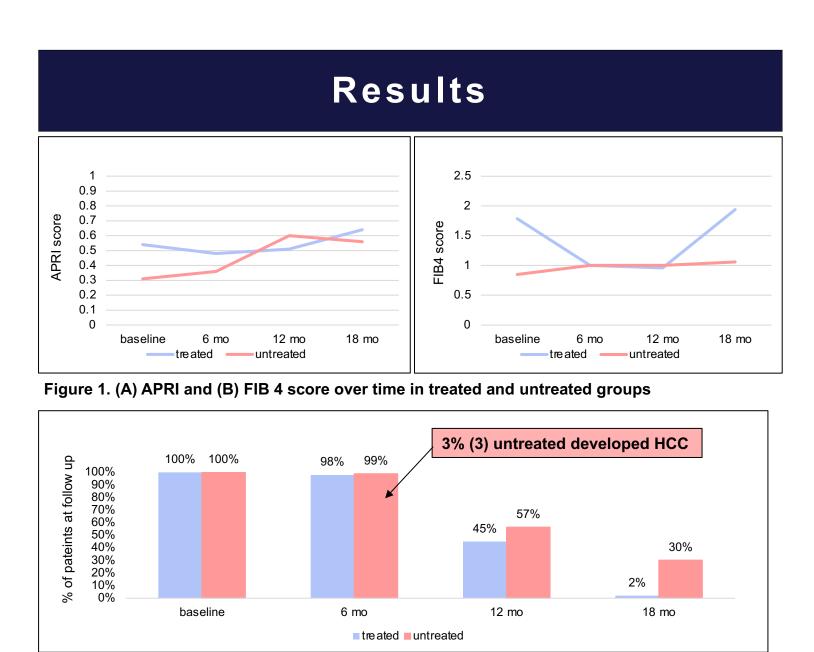


Figure 2. Percent of patients at follow up visits in treated and untreated groups

- findings.
- follow up.
- at 18 months.

Conclusions

• Individuals on **HBV treatment** were more likely to be male, and have higher baseline lab

• Those untreated showed more **liver-unhealthy** habits such as alcohol and khat consumption and less coffee intake.

• Untreated individuals developed more HCC at

• Interestingly, they were **more likely** to follow up