

Outcomes of Chronic Hepatitis B in a Primary Care Setting

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ABSTRACT:

Background:

Although HBV infection is decreasing because of the implementation of HBV vaccination, chronic HBV is still one of the most predominant hepatitis. Chronic infection of HBV is one of the leading causes of cirrhosis, decompensated liver, hepatocellular carcinoma (HCC) and liver related death. This is the first national study to evaluate the long-term outcomes of chronic HBV infection in a primary care setting.

Materials and methods:

This is a retrospective cohort study. Data was collected retrospectively from the medical records of all patients who were diagnosed with hepatitis B and were seen in the department of Family Medicine at KFSH&RC from January 2002 to March 2017. Data collection included hepatitis B serology, hepatitis B Detection and Quantitation, liver function test, liver ultrasound results, liver biopsy results and rates of HCC, cirrhosis and mortality.

Results:

We found 50 patients diagnosed with hepatitis B. The mean age of included patients was 50 years with 72% male and 28 % female. The majority of our population were Saudi (90%). Among the included patients, (20%) have chronic hepatitis, while (80%) became chronic carriers. Genotype was done for 14% of included patients, genotype D (12%) was predominant genotype followed by E (2%). Elevated liver enzymes were observed in (60%) of our population, liver cirrhosis developed in (16%), while (4%) of them developed HCC. Death occurred in (2%) of patients with non-liver related causes.

Conclusion:

The prevalence of hepatitis B is dropping in our community. Our study showed that majority of patients with chronic HBV became chronic carriers. Progression to Liver cirrhosis was modest and the development of HCC was relatively rare. Liver related mortality rate was low.