Hepatitis B and Liver Cancer Connections

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A Dedicated Program of the Hepatitis B Foundation
Welcome to Liver Cancer Connect

Who Should Be Screened for Liver Cancer

Who should be screened?

NEWLY DIAGNOSED?
We can help answer your questions.

TREATING LIVER CANCER
Learn about current treatment options.

NEWS AND EVENTS

2015 Liver Cancer Webinar Series

Upcoming Webinars

Hepatitis B and Liver Cancer Connections

Date: Wednesday, December 2, 2015

Join Hep B United on Wednesday, December 2, from 3:00 PM to 4:00 EST for a free interactive webinar on Hepatitis B and Liver Cancer Connections. Learn more about liver cancer prevention and an upcoming awareness campaign. Register here.

Glossary
Patient-Focused Resource on Liver Cancer

- Liver cancer centers
- Drug watch
- Clinical trials
- Information for newly diagnosed
- Talking to your health care team
- Treatment options
Liver Cancer: Scope of the Problem

- World’s 6th most common cancer, but 2nd leading cause of cancer-related deaths
- Fastest-growing cause of cancer deaths for Americans < 65 yrs
- 3rd leading cause of cancer deaths in the U.S. by 2030
  - ~ 36,000 new cases, ~25,000 deaths in 2015
  - Asian Americans have highest incidence of liver cancer
  - Hispanic individuals have 2x higher incidence rate than non-Hispanic whites
- Most common form (~90%) of primary liver cancer in adults is hepatocellular carcinoma (HCC)
- Bile duct cancer (cholangiocarcinoma): 10% -20% of liver cancer in U.S.
Treatment Options for Liver Cancer

- Liver transplantation
- Surgery (resection)
- Localized therapies (damage/eliminate tumor locally)
  - for tumors that cannot be surgically removed, or for cancer that has spread beyond the liver
  - to prepare a patient for surgical treatment
  - radiofrequency ablation (RFA), transarterial chemoembolization (TACE), radioembolization
- Targeted oral therapy (pills)
How Liver Cancer Develops

Risk factors:
- Diabetes
- Obesity
- Hepatitis B or C
- Alcohol
- Fatty Liver
- Iron
- Aflatoxins

Chronic liver injury → Cirrhosis → Liver cancer

- Inflammation
- Cell damage
- Uncontrolled cell growth

Chronic hepatitis → Cirrhosis → Liver cancer (HCC)
- 15-40 years
- 3%-5% per year
- 0.5% per year
Early Liver Cancer Is Often “Silent”

Severe symptoms may include:

- Nausea/vomiting
- Jaundice (yellowing of skin and eyes)
- Swollen abdomen
- Abdominal pain
- Itchy skin
- Weight loss

• Liver cancer often has no detectable signs or symptoms in the beginning stages.
• Most patients are diagnosed at more advanced stages when they have severe symptoms of liver failure.
Spotlight on Hepatitis B

- World’s leading cause of liver cancer
- 1 in 3 people infected worldwide; 248 million have chronic hepatitis B virus (HBV) infection
- Each year 1 million die of chronic HBV; more than half due to liver cancer
- 1 in 20 Americans has been infected; ~2 million Americans have chronic HBV; 50% Asian descent
- Passed from infected mother to infant at birth; exposure to infected blood, unprotected sex
- CDC and USPSTF: HBV screening for high-risk individuals
Spotlight on Hepatitis C

- 170 million people have chronic hepatitis C virus (HCV) infection worldwide
- About 5 million Americans have chronic HCV (baby boomers: 5x as likely to have HCV than other adults)
- Leading cause of liver cancer in the U.S. due to the greater number of people infected with HCV
- Exposure to infected blood; contaminated needles, shared drug paraphernalia
- **CDC**: people born 1945-1965 get tested for HCV
Spotlight on Fatty Liver Disease

NAFLD = Nonalcoholic fatty liver disease
- Occurs in people who drink little or no alcohol
- Fatty deposits in the liver caused by obesity, diabetes, high triglycerides but little damage
- Affects 10% to 20% of Americans

NASH = Nonalcoholic steatohepatitis
- Result of disease progression from NAFLD with liver inflammation and damage
- Affects 2% to 5% of Americans, mainly obese individuals
- Can lead to cirrhosis and ultimately liver cancer

Fatty Liver Disease

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Liver Cancer Screening and Surveillance

- **Screening**: first test to detect risk for/presence of liver cancer
- **Surveillance**: all subsequent testing (regular monitoring)
- **The goal is to diagnose liver cancer as early as possible**

- **Common blood tests**
  - Complete blood count (CBC)
  - Alpha-fetoprotein blood test (AFP)
  - Additional FDA-cleared blood tests (include AFPL3%, DCP)

- **Imaging studies**
  - Ultrasound (US)
    - with elastography
  - Computed tomography (CT or CAT scan)
  - Magnetic resonance imaging scans (MRI)
Who Needs Liver Cancer Screening?

Screening: first test; Surveillance: all subsequent testing

American Association for Study of Liver Diseases recommends:
- All men with hepatitis B: start screening/surveillance at age 40 years
- All women with hepatitis B: start screening/surveillance at age 50 years
- Individuals with chronic HCV and cirrhosis

The following high-risk groups may need screening/surveillance earlier and more frequently:
- Family history of liver cancer (or family history unknown)
- Asian and Pacific Islander immigrants and their children
- African immigrants and their children
- Co-infection with HIV, HBV and/or HCV
- Elevated liver cancer biomarkers (AFP, AFPL3%, or DCP)

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Screening and Surveillance Are Important

- In people with chronic HBV infection, liver cancer can develop with or without cirrhosis; screening/surveillance is essential.
- In people with chronic HCV infection, cirrhosis occurs before liver cancer develops.

Screening/surveillance increases likelihood of finding liver cancer early and offering the chance of better survival:

- More treatment options for early-stage liver cancer.
- Early detection may increase treatment success.
- Offer cure to some patients with liver cancer.
- Proceed to liver transplant before the cancer is too large.
Preventing Liver Cancer: Here’s How

By detecting and eliminating its major causes:

• Get tested if you are at risk for HBV or HCV
• Get vaccinated to prevent HBV infection; ask about HBV treatment
• There’s no vaccine for HCV, but it can be cured!
• Prevent cirrhosis; adopt healthy lifestyle (stop excessive alcohol use; maintain healthy weight and diet)
• At risk? Enter surveillance program for regular monitoring

www.livercancerconnect.org: webinars and information on treatments, clinical trials, support services for families facing liver cancer

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World’s First Anti-Cancer Vaccine

HBV vaccine prevents HBV, leading cause of liver cancer

- Safe HBV vaccines available since 1986
- Hepatitis B vaccine recommended for:
  - All newborns and children up to 18 years
  - Health care and emergency personnel
  - Persons living with diabetes
  - Persons with end-stage kidney disease or undergoing dialysis
  - Men who have sex with men
  - Sexually active teens and adults
  - Close family/household members living with an infected person
  - Travelers to countries where hepatitis B is common
Thank You!

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