

Value and kinetics of virological markers in the natural course of chronic hepatitis D virus infection

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Background & Aim:

- Chronic hepatitis D virus (HDV) infection can cause severe liver disease.
- In the light of new treatment options, it is of particular importance to identify patients at risk for liver-related complications.
- We aimed to **investigate the kinetics and predictive value of novel virological and immunological markers in the natural course** of chronic HDV infection.

Methods:

- HBcrAg, HBV RNA and quantitative anti-HBc** were analyzed in samples from patients with chronic HDV infection at **three consecutive time points** to study kinetics in the natural course of infection. **Antiviral treatment conditions had to be similar** at all study time points. Results were linked to **clinical outcome**.
- The primary endpoint was the **composite endpoint of any liver-related event** (hepatic decompensation, hepatocellular carcinoma, liver transplantation or liver-related death).
- Assays used in the study: HBV RNA: Roche Cobas 6800, LLOQ 10 cp/ml; HBcrAg: Lumipulse® G Fujirebio-Europe, LLOQ 3 log U/ml; Anti-HBc: Lumipulse® G Fujirebio-Europe, LLOQ 1 IU/ml; HDV RNA: RoboGene HDV RNA quantification kit 2.0 Roboscreen, LLOQ 82 IU/ml

Results:

Total, n	190
Male, n (%)	124 (65)
Age, years	41.3 (32.4-49.7)
HDV RNA (log IU/ml)	4.3 (2.55-5.54)
HDV RNA undetectable, n (%)	31 (16)
HBcrAg (log U/ml)	3.9 (2.9-4.73)
- HBcrAg ≥ 3 log U/ml, n (%)	141 (74)
- HBcrAg < 3 log U/ml or undetectable, n (%)	49 (26)
HBV RNA (cop/ml)#	0 (0-10)
- HBV RNA ≥ 10 cop/ml, n (%)	20 (11)
- HBV RNA < 10 cop/ml or undetectable, n (%)	155 (89)
anti-HBc (IU/ml)	469 (123.5-1570)
HBV DNA (IU/ml)	20 (0-58.2)
HBsAg (IU/ml)	8490 (2250-14032)
HBeAg positive, n (%)§	25 (14)
ALT (U/L)	64 (38-132)
AST (U/L)	64 (40-94)
Platelets (x1000/µl)	135 (64-184.3)
Cirrhosis, n (%)	98 (52)
NA treatment, n (%)	82 (43)
Previous IFN treatment, n (%)	67 (35)
Total follow-up time (years)	2.69 (1.13-6.51)

Table 1. Baseline characteristics. Continuous parameters are depicted as median with IQR, categorical variables as number with percentage. #available for 175 patients, §available for 183 patients

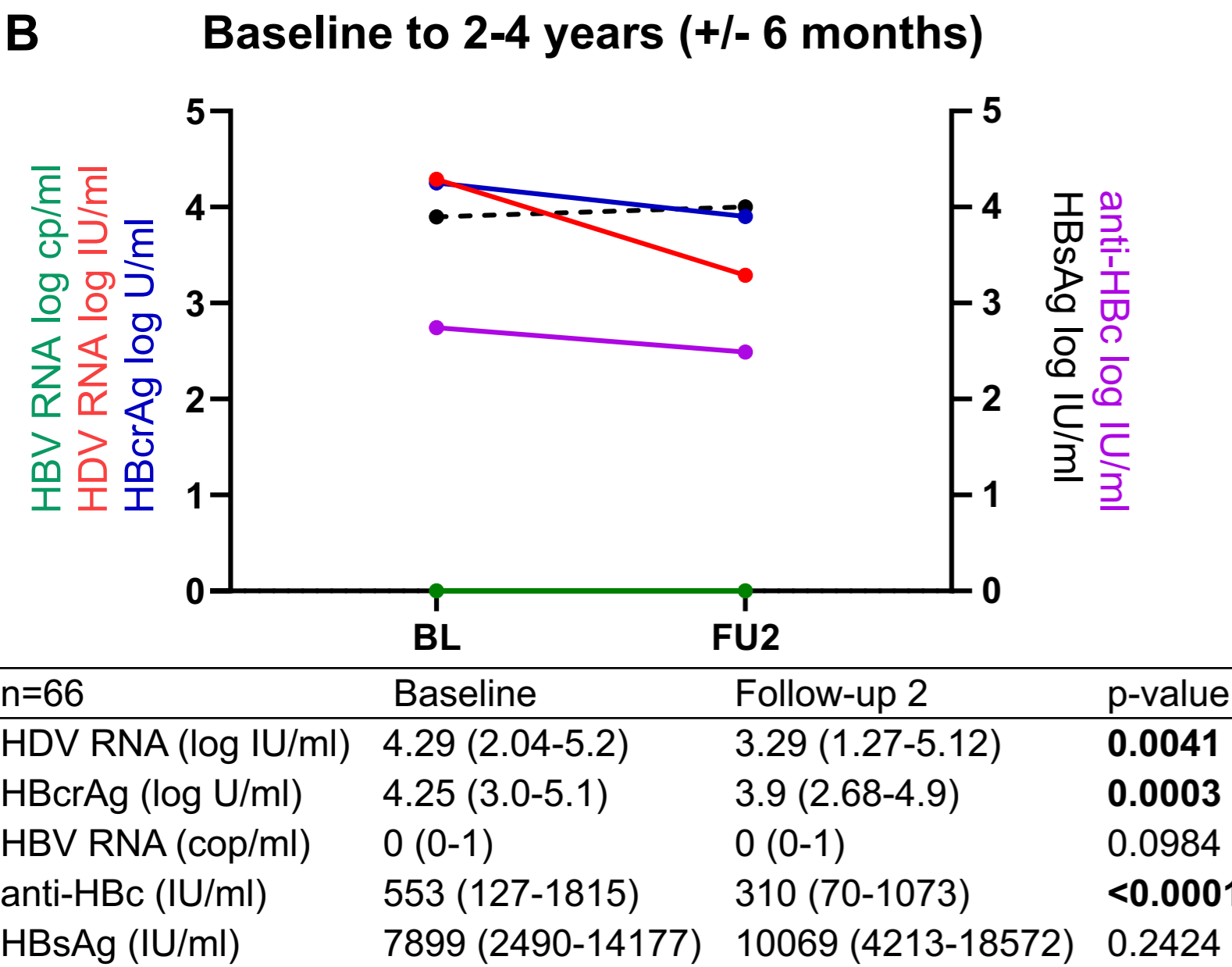
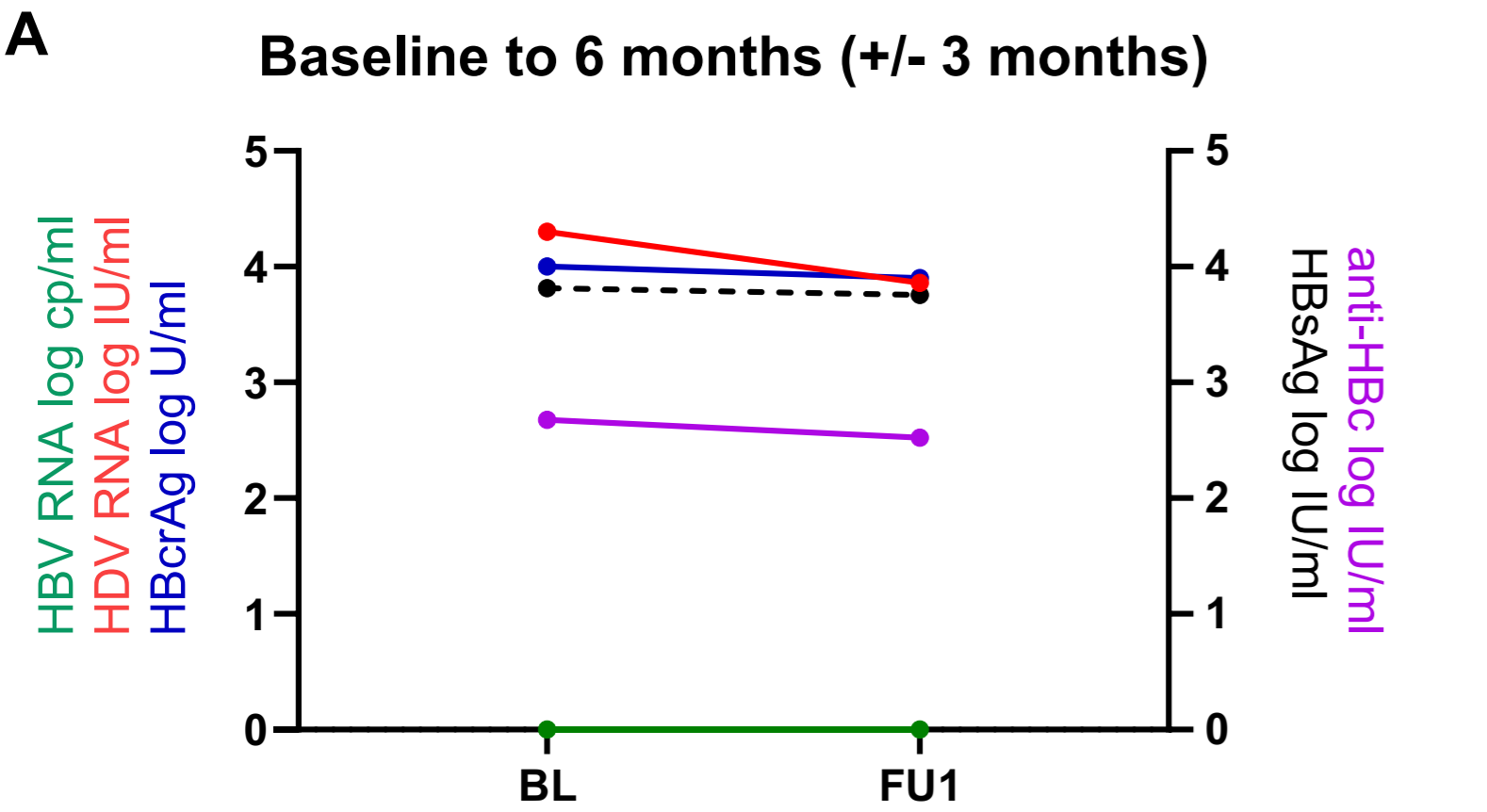


Figure 1: Comparison of median levels of virological parameters from baseline to FU1 (A) and baseline to FU2 (B). Median levels with interquartile range are depicted in the tables. Wilcoxon signed-rank test was used for comparison of medians.

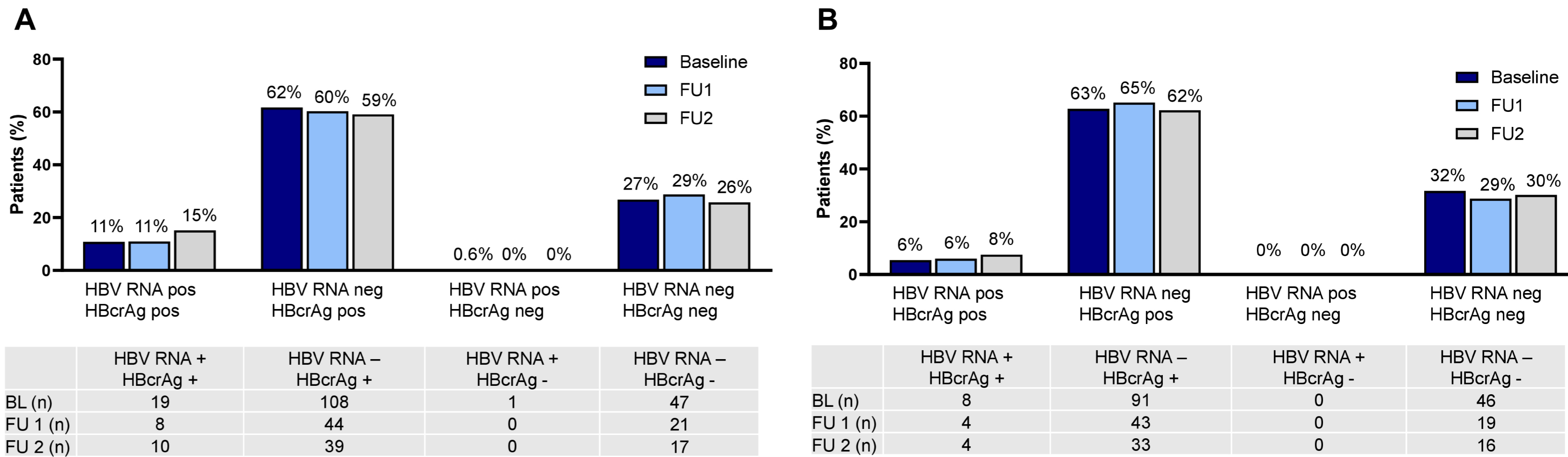


Figure 2: Proportion of all (A) or HBeAg-negative (B) patients with concordant or discordant levels of HBcrAg or HBV RNA at study time points. Undetectable HBcrAg is defined as HBcrAg < 3 U/ml, undetectable HBV RNA is defined as HBV RNA < 10 IU/ml.

	Development of the combined endpoint			Multivariable analysis: Model A			Multivariable analysis: Model B		
	No (128)	Yes (62)	p-value	HR	95% CI	p-value	HR	95% CI	p-value
Male, n (%)	79 (62)	45 (73)	0.140						
Age, years	38.1 (29.1-44.8)	50.1 (41.4-57.0)	<0.001	1.064	1.036-1.094	<0.001	1.063	1.034-1.092	<0.001
Cirrhosis, n (%)	42 (33)	56 (90)	<0.001	7.739	3.239-18.49	<0.001	7.355	3.112-17.38	<0.001
NA treatment	50 (39)	32 (52)	0.101						
IFN prior to BL	47 (37)	20 (32)	0.546						
HBV RNA (log cop/ml)#	0 (0-1)	0 (0-1)	0.764						
HBV RNA detectable #	17 (14)	3 (6)	0.093						
HBcrAg (log U/ml)	3.85 (2.63-4.7)	3.95 (3.08-4.8)	0.459						
HBcrAg detectable	93 (73)	48 (77)	0.482						
Anti-HBc (IU/ml)	587 (176-2246)	214 (51-667)	<0.001	1.0	1.0-1.0	0.3341			
HBcrAg/anti-HBc ratio	1.40 (0.97-1.85)	1.69 (1.24-2.31)	0.002				1.096	0.8444-1.423	0.4899
HBsAg (IU/ml) §	8628 (2114-14071)	7016 (2250-12636)	0.593						
HDV RNA (log IU/ml)	4.19 (1.15-5.56)	4.78 (3.26-5.54)	0.184						
HDV RNA detectable	102 (80)	57 (92)	0.032	2.094	0.7928-5.532	0.1358	1.747	0.6845-4.461	0.2431

Table 2. Uni- and multivariate analysis of baseline characteristics of patients with and without the development of the combined endpoint (decompensation, HCC, LTx/death) during follow-up. Continuous parameters are depicted as median with IQR, categorical variables as number with percentage. Mann Whitney U test, Chi-Square or Fisher's exact test were used for group comparison. Multivariable Cox regression was used to address independent association of variables with the development of the combined endpoint during follow-up. # available for 120 and 55, respectively § available for 92 and 40, respectively

	Development of the combined endpoint			Multivariable analysis		
	No (n=42)	Yes (n=56)	p-value	Hazard ratio	95% CI	p-value
Male, n (%)	29 (69)	40 (71)	0.798			
Age, years	41.5 (33.2-47.6)	50.1 (41.4-55.3)	<0.001	1.046	1.008-1.087	0.019
NA treatment	20 (48)	29 (52)	0.683			
IFN prior to BL	14 (33)	18 (32)	0.901			
HBV RNA (log cop/ml)#	0 (0-0)	0 (0-0.25)	0.328			
HBV RNA detectable#	3 (7)	2 (4)	0.654			
HBcrAg (log U/ml)	3.8 (3.0-4.6)	3.85 (3.03-4.68)	0.752			
HBcrAg detectable	33 (79)	43 (77)	0.834			
Anti-HBc (IU/ml)	433 (127-1335)	214 (51-644)	0.047	1.0	1.0-1.0	0.014
HBcrAg/anti-HBc ratio	1.45 (1.11-1.95)	1.67 (1.23-2.28)	0.102			
HBsAg (IU/ml) §	88818 (1419-11756)	7016 (2250-12608)	0.835			
HDV RNA (log IU/ml)	4.02 (1.53-5.46)	4.63 (3.01-5.46)	0.309			
HDV RNA detectable	34 (81)	51 (91)	0.144			
Sodium mmol/L	140 (137-141)	139 (137-141)	0.639			
Creatinine µmol/L	69 (59-80)	66 (55-74)	0.117			
AST U/L	63 (38-89)	80 (56-105)	0.015	1.009	1.004-1.014	<0.001
ALT U/L	58 (36-117)	57 (38-105)	1.0			
gGT U/L	74 (36-159)	71 (35-129)	0.909			
AP U/L	94 (69-128)	143 (106-172)	<0.001	1.005	1.001-1.010	0.011
CHE kU/L	5.19 (3.95-6.91)	3.47 (2.48-4.45)	<0.001	0.483	0.361-0.646	<0.001
Bilirubin mmol/L	11 (9-19)	20 (16-46)	<0.001	1.006	1.0-1.012	0.043
Albumin g/L	40 (36-41)	33 (28-36)	<0.001			
Platelets x1000/µl	84 (49.5-146.5)	58 (48-96)	0.023	1.0	1.0-1.0	0.021
INR	1.17 (1.09-1.26)	1.4 (1.23-1.63)	<0.001			

available for 91 samples § available for 68 samples

Conclusion:

- In this well-characterized cohort of 190 HDV-infected patients with a long follow-up, neither baseline levels nor kinetics of HBcrAg, HBV RNA or quantitative anti-HBc were independently associated with clinical outcome.
- Stage of liver disease and age were predictors of liver-related events.
- Quantitative anti-HBc was significantly lower in patients with liver cirrhosis and especially in those developing liver-related endpoints.
- This encourages further research, particularly in the context of antiviral treatment that aims to achieve immunological control.