

# ILC 2021 opens with focus on impact of COVID-19 on global liver disease

*People living with advanced liver disease not protected by Pfizer-BioNTech COVID-19 vaccine*

GENEVA, SWITZERLAND, June 23, 2021 /EINPresswire.com/ -- For Immediate Release

Media Release



Since 1966 the International Liver Congress has helped answer the most pressing research questions in hepatology, and this year is no different."

*Philip Newsome*

ILC 2021 opens with focus on impact of COVID-19 on global liver disease

New data demonstrates that chronic liver disease increased the odds of COVID-19 death by 80% and Pfizer-BioNTech COVID-19 vaccine confers low immunity on people with advanced liver disease

Wednesday 23 June 2021 (Geneva, Switzerland)--Leading liver disease researchers announced important new developments on the impact of the COVID-19 pandemic on people living with liver disease at the 2021 International liver Congress (ILC 2021) convened by the European Association for the Study of the Liver (EASL), today. This includes new data indicating that people with advanced liver disease are extremely vulnerable to the novel coronavirus and results of a study that indicates that the Pfizer-BioNTech SARS-CoV-2 vaccine confers low immunity on people with advanced liver disease. A third booster shot is being recommended.

Other announcements included new insights into the impact of the COVID-19 pandemic on the incidence of alcohol related liver disease and mortality rates of people with non-alcoholic fatty liver disease (NAFLD) and some encouraging data on tenofovir in preventing serious COVID-19 illness amongst people living with chronic Hepatitis B.

"Since 1966 the International Liver Congress has helped answer the most pressing research questions in hepatology, and this year is no different," said Philip Newsome, General Secretary of EASL and Professor of Experimental Hepatology and Director of the Centre for Liver Research at the University of Birmingham in the UK.

"We are beginning to understand more clearly just how disproportionately COVID-19 is impacting on people living with liver-related diseases and the studies presented at ILC 2021 advance our

knowledge on multiple fronts, knowledge that can potentially help inform policy responses to the pandemic going forward.”

Today's official press conference highlighted six studies covering the intersection of COVID-19 and liver disease selected from over 1500 thousands of abstracts being presented at ILC 2021.

Data measures the contribution of chronic liver disease and of alcohol use disorders to the burden of COVID-19 in France in 2020 and reports that chronic liver disease increased the odds of Covid-19 death by 80 per cent.

This study used the French National Hospital Discharge database to select patients (N=187,283; mean [SD] age 66 [22] years; 25% men) aged 18 years and older who were discharged in the year 2020 with a diagnosis code for Covid-19 and captured all, 2011-2020, corresponding, standardized discharge summaries, including demographics (sex, age at entry, and postal code of residency); primary and associated discharge diagnosis codes according to the WHO International Classification of Diseases, tenth revision (ICD-10); medical procedures received; length of stay; and discharge modes (including in-hospital death). Overall, 16,338 (8.7%) patients diagnosed with chronic liver disease were admitted for Covid-19 in France in 2020 and 3943 (24.1%) of them died, including 2518 (63.9%) after a liver-related complication.

Vincent Mallet of the Cochin University Hospital in France reported that chronic liver disease increased the odds of Covid-19 death by 80%, that liver-related complications and alcohol use disorders reduced the odds of mechanical ventilation by, and that therapeutic effort limitation may have contributed to COVID -19 deaths of patients with chronic liver disease

Abstract: Chronic liver disease and the risk of mortality after Covid-19: a national, retrospective, cohort study for 2020 (GS-1587)

Session: Thursday June 24,16:00-17:30 CET

Study in Mexico finds that people living with metabolic associated fatty liver disease (MAFLD) at higher risk of dying from COVID-19

In this study 348 patients admitted in a tertiary referral hospital located in México city with a positive SARS-CoV-2 PCR test from 4 April to 24 June 2020 were analyzed. Three groups were formed: 1.- Control group (n=80), 2.- Isolated hypertransaminasemia (IH) group (n=185) and 3.- MAFLD group (n=83). Additionally, other variables associated with severity in COVID-19 were obtained, including gender, age, and comorbidities (T2D, Hypertension and obesity). A Binary Logistic Regression adjusted to the variables associated with severity in COVID-19 was made to obtain OR of death between the groups.

Martín Uriel Vázquez Medina of the Escuela Superior de Medicina reported that adjusted OR for death with respect to the control group were people living with MAFLD were five times likelier to die during hospitalization by COVID-19 than people without these factors.

Abstract: Association of MAFLD with mortality in patients with COVID-19 in Mexico (PO-445)

New research reveals that Tenofovir can reduce the severity of COVID-19 infection in chronic hepatitis B patients (PO-1449)

This study aimed to analyse the incidence and severity of COVID-19 in patients with chronic hepatitis B on the antiviral drug treatment tenofovir or entecavir. A database search of 4736 CHB patients from 28 Spanish hospitals was undertaken.

Beatriz Mateos Muñoz of the Hospital Universitario Ramón y Cajal in Spain reported that 117 patients with COVID-19 were identified, 67 of whom were taking tenofovir and 50 on entecavir. 41 (35%), 5 (4.3%) and 6 (5.1%) out of the 117 patients with COVID-19 were hospitalized, admitted to ICU or died, respectively. Compared with patients on TDF, those on ETV had significantly ( $p < 0.05$ ) greater rates of obesity (22 vs. 9%), diabetes (32 vs. 12%), ischemic cardiopathy (14 vs. 3%) and arterial hypertension (44 vs. 18%). There was a trend for greater severity of advanced (F3-F4) fibrosis in the ETV groups (35 vs. 18%,  $p = 0.06$ ). The incidence of COVID-19 in patients on TDF or ETV was similar but compared with those on tenofovir, patients on entecavir more often had severe COVID-19, required ICU, ventilatory support, had longer hospitalization or died. In multivariate logistic regression adjusted by age, sex, obesity, comorbidities and fibrosis stage, TDF reduced by 6-fold the risk of severe COVID-19. Patients with CHB on TDF have a lower risk of severe COVID-19 infection than those on ETV. TDF seems to exert a protective effect in patients with CHB infected by COVID-19.

Abstract. Tenofovir reduces the severity of COVID-19 infection in chronic hepatitis B patients (PO-1449)

New data evaluates the impact of COVID-19 restrictions on patients with alcoholic and non-alcoholic cirrhosis as well as alcoholic hepatitis (AH) who were hospitalized in Alberta, Canada.

This large population-based study identified 2,916 hospitalizations for non-alcoholic cirrhosis, 2,318 hospitalizations for alcoholic cirrhosis, and 1,408 AH hospitalizations between 2018 and 2020.

Abdel-Aziz Shaheen, of the University of Calgary in Canada, reported that AH patients had a significant increase in average monthly admission (69.5 vs. 39.6,  $P < 0.001$ ) with April 2020 being the inflection point. Although AH patients admitted post COVID-19 restrictions were younger (median age 43 vs. 47,  $P = 0.02$ ), there were no significant differences in admission outcomes pre- and post-COVID-19 among AH cohort.

Monthly admission rates were stable for non-alcoholic and alcoholic cirrhosis, however, there was a significant 9% increase in AH admissions per month between March and September and the average rate of AH hospitalizations rate compared to overall hospitalizations rate doubled from 11.6/ 10,000 general hospitalizations to 22.1/ 10,000 general hospitalizations for the same period.

Abstract: The alarming impact of COVID-19 pandemic on alcohol-related liver disease: a population-based Canadian study (PO-1099)

COVID-19 positive patients with alcohol user disorder had a longer hospital stay and died at a significantly younger age

This retrospective study identified some that some 18 % of 20 598 people during the pandemic and 27 356 people pre-pandemic at Nottingham University in the UK were screened positive for alcohol user disorder.

Patients in all the alcohol-risk groups were significantly younger ( $p < 0.05$ ) than low-risk groups. Male sex and white ethnicity were associated with a remarkably higher prevalence of AUD.

Mohsan Subhani from the Nottingham University Hospitals NHS Trust noted that higher proportions were alcohol-dependent in the Pandemic cohort. In the Pandemic cohort, the alcohol-dependent group had a sixteen-fold increased risk (OR 15.8,  $P < 0.001$ ) of mental and behavioural disorders. The COVID-19 positive patients with concomitant AUD had a longer hospital stay and died at a significantly younger age (mean difference 8 years,  $p < 0.05$ ).

Abstract: Effect of COVID-19 on alcohol use disorder among hospitalised patients: a retrospective cohort control study (OA-1381)

Session: Saturday June 26, 10:00-11:30 CET

Older age and advanced liver disease are risk factors for a lower immune response to the Pfizer's-BioNTech COVID-19 vaccine.

Researchers undertook an analysis of 88 patients living with hepatic fibrosis who had received both doses of the Pfizer's-BioNTech SARS-CoV-2 vaccine to assess their immune response.

Histologic NAS grading and CRN fibrosis scoring showed significant changes. Mean NAS scoring found in the excellent responders as compared with  $2.9 \pm 1.2$  in the good responders ( $p = 0.045$ ), that is mainly derived from significant steatosis changes of  $1.6 \pm 0.9$  vs.  $1.2 \pm 0.7$ , repeatedly ( $p = 0.02$ ). Hepatocyte ballooning and lobular inflammation were similar. Importantly, advanced fibrosis correlated with weaker vaccine responses. Mean Fibrosis scoring was  $1.7 \pm 1.1$  vs.  $2.2 \pm 1.5$ , percentage of advanced fibrosis (F3-F4) were 23% vs. 48% of each group, respectively ( $p = 0.05$ ). Findings confirmed also by significant changes in blood tests.

Rifaat Safadi of the Hadassah-Hebrew University Hospital in Israel explained that older age, and advanced fibrosis with decreased steatosis are risk factors for lower vaccine response And added that a third dose vaccine booster in those risk factor populations should be evaluated in future trials.

Abstract: Elderly with advanced liver fibrosis had lower response to Pfizer's SARS-CoV-2 vaccine response (OA-2854)

Session: Saturday June 26, 10:00-11:30 CET

ENDS

Further information

Media Registration: Accredited media can apply for free registration here:

Press Programme: The Official Press Programme can be found here:

All ILC 2021 Official Press Conferences will broadcast live on Zoom for registered media.

Embargo Policy: Please note that the ILC2021 Embargo Policy has changed this edition -media representatives are asked to familiarise themselves with the new policy.

Contact:

Michael Kessler

Michael Kessler Media

EASL Media Relations

Email: [michael.kessler@inton-media.com](mailto:michael.kessler@inton-media.com)

Mob: +34 655 792 699

Twitter: @mickessler

About The International Liver Congress™

This annual congress is EASL's flagship event, attracting scientific and medical experts from around the world to learn about the latest in liver research and exchange clinical experience. Attending specialists present, share, debate and conclude on the latest science and research in hepatology, working to enhance the treatment and management of liver disease in clinical practice. This year, the congress is being held entirely digitally due to the global health situation.

About The European Association for the Study of the Liver (EASL)

Since its foundation in 1966, this not-for-profit organisation has grown to over 4,500 members from all over the world, including many of the leading hepatologists in Europe and beyond. EASL is the leading liver association in Europe, having evolved into a major European association with international influence, and with an impressive track record in promoting research in liver disease, supporting wider education, and promoting changes in European liver policy.

Michael Kessler

Michael Kessler Media - EASL Media relations

+34 655 79 26 99

[email us here](#)

---

This press release can be viewed online at: <https://www.einpresswire.com/article/544541854>

EIN Presswire's priority is source transparency. We do not allow opaque clients, and our editors try to be careful about weeding out false and misleading content. As a user, if you see something we have missed, please do bring it to our attention. Your help is welcome. EIN Presswire, Everyone's Internet News Presswire™, tries to define some of the boundaries that are reasonable in today's world. Please see our Editorial Guidelines for more information.

© 1995-2021 IPD Group, Inc. All Right Reserved.