



## Impact of hepatitis B and delta virus co-infection on liver disease in Mauritania: a cross sectional study.

Submitted by Pascal Veillon on Wed, 10/01/2014 - 18:05

Titre Impact of hepatitis B and delta virus co-infection on liver disease in Mauritania: a cross sectional study.

Type de publication Article de revue

Auteur Lunel-Fabiani, Françoise [1], Mansour, Wael [2], Amar, Abdellahi Ould [3], Aye, Mohamed [4], Le Gal, Frédéric [5], Malick, F. Zahra Fall [6], Baïdy, Lô [7], Brichler, Ségolène [8], Veillon, Pascal [9], Ducancelle, Alexandra [10], Gordien, Emmanuel [11], Rosenheim, Michel [12]

Editeur WB Saunders

Type Article scientifique dans une revue à comité de lecture

Année 2013

Langue Anglais

Date 2013 Nov

Pagination 448-57

Volume 67

Titre de la revue J Infect

ISSN 1532-2742

Mots-clés Adolescent [13], Adult [14], Aged [15], Analysis of Variance [16], Coinfection [17], Cross-Sectional Studies [18], Female [19], Hepatitis Antibodies [20], Hepatitis B [21], hepatitis B virus [22], Hepatitis D [23], hepatitis Delta virus [24], Humans [25], Liver Cirrhosis [26], Male [27], Mauritania [28], Middle Aged [29], Risk Factors [30]

**OBJECTIVES:** Mauritania is a highly endemic region for hepatitis B (HBV) and delta (HDV) viruses. No data are available on HDV's impact on the severity of liver disease in consecutive HBV-infected patients in Africa. This study evaluated the degree of liver fibrosis in a cohort of chronic HBV carriers.

**METHODS:** Three-hundred consecutive HBV-infected Mauritanian patients were checked for HDV infection via the detection of anti-HDV antibodies (Ab) and viral RNA. HBV- vs. HBV/HDV-infected patients were compared by physical examination, biological analyses, and the APRI (aspartate aminotransferase to platelet ratio index) and FibroMeter tests for determination of liver fibrosis.

**RESULTS:** More than 30% of the patients had anti-HDVAb. Among these, 62.2% were HDV-RNA positive. Co-infected patients were older (>8-years) than HBV-mono-infected patients. They had more liver tests abnormalities and clinical or ultrasound signs of liver fibrosis. APRI and FibroMeter scores were also significantly increased in these patients. In multivariate analysis, beyond HDVAb, male gender and HBV-VL >3.7 log IU/mL were the only markers linked to significant liver fibrosis.

**CONCLUSIONS:** In Mauritania, HDV co-infection worsens liver disease, both clinically and biologically, as confirmed by the APRI and FibroMeter tests. These tests may be useful for the management of delta hepatitis, which is a major health problem in Mauritania.

Résumé en anglais

URL de la notice	<a href="http://okina.univ-angers.fr/publications/ua4208">http://okina.univ-angers.fr/publications/ua4208</a> [31]
DOI	10.1016/j.jinf.2013.06.008 [32]
Autre titre	J. Infect.
Identifiant (ID) PubMed	23796871 [33]

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