Results: Among 518 liver biopsies, the most frequent histological finding was Mild Chronic Hepatitis (57.1%, n=296) followed by moderate Chronic Hepatitis (41.5%, n=215) and Severe Chronic Hepatitis was found in 7 patients (1.4%). 87.5% patients had grade 0–8 (mild chronic inflammation) according to HAI scoring system. 56.6% (n=293) patients had no fibrosis (stage 0), 42.8% (n=222) had some degree of fibrosis (stage 1-5) and 0.6% n=3 had cirrhosis (stage 6) on liver biopsy according to HAI scoring system. Among those with normal ALT 63% had mild inflammation and 37% had moderate to severe inflammation. About 54.5% of those with high ALT also had mild inflammation and 45.5% had moderate to severe inflammation.

Conclusion: Thus there was no statistically significant relationship between ALT levels and the severity of inflammation on Liver Biopsy (p value of 0.085)

PP-134 HCV F protein, a protein correlating with HCV chronic infection
Jing Kong*, Xiaozhao Deng, Zhongchan Wang, Yun Zhang, Chunli Chu. Huadong Research Institute for Medicine and Biotechniques

Objectives: Hepatitis C virus (HCV) produces a novel protein, known as F protein. F protein is encoded by a open reading frame (ORF) that overlaps the core gene in the +1 frame (core +1 ORF). In this study, we attempt to understand the biological functions of the F protein in the pathogenesis of HCV infection.

Methods: HCV F protein, a +1 frameshifting at codon 42 followed by a rephasing in the normal open reading frame at stop codon 144, from the genotype 1b are expressed in E. coli. Proteins from E. coli lysates transformed with pGEX-F and the corresponding empty vector (pGEX-4F-2) were subjected to 10% SDS-PAGE and detected using Western blotting. The presence of antibodies specific for the novel F protein was evaluated in the serum of patients with an indirect ELISA.

Results: E. coli BL21 (DE3) cells harboring the plasmids were harvested, and lyzed in SDS sample buffer and examined for the production of aimed protein about 43kD on SDS-PAGE.

Results: of indirect ELISA carried out on 120 serum samples from 28 acute HCV patients, 62 chronic HCV patients, 30 hepatic cirrhosis, and 10 healthy samples. Sera of 54% (15/28) of the HCV acute patients reacted with F protein, compared to 37 of the 62 (60%) chronic patients, and 20 of 30 (67%) liver cirrhosis infected with HCV, and this association reached statistical significance.

Conclusion: F protein may intimately linked to the molecular pathogenesis in HCV-infected individuals.

PP-135 Up-regulation of HCV p7 on ASGPR1 gene promoter
Jiang Guo*. Institute of Infectious Diseases, Beijing Ditan Hospital, Beijing, China

Background: To investigate the transregulating effect of HCV p7 on ASGPR1 gene promoter.

Methods: Polymerase chain reaction (PCR) technique was employed to amplify the coding sequence of ASGPR1 promoter from HepG2 genomic DNA, and the product was subcloned into pCAT3-Basic by Kpn I and Bgl II, named pCAT3-ASGPR1p. pCAT3-ASGPR1p was transfected into the hepatoblastoma cell line HepG2, then cotransfected with pCDNA3.1(−)HCV p7 by FuGENE 6 transfection reagents. The HepG2 cells transfected with pCAT3-Basic was used as negative control. The activity of CAT in HepG2 cells transfected was detected by a ELISA kit after 48 hours, which reflected the transregulating function of pCDNA3.1(−)HCV p7 to ASGPR1 gene promoter.

Results: The report vector pCAT3-ASGPR1p has been constructed and had been confirmed by restriction enzyme digestion and sequencing. The expression of CAT in HepG2 cells co-transfected with pCAT3-ASGPR1p and pCDNA3.1(−)HCV p7 was 7.7 times as higher as that of pCAT3-Basic, and 2.4 as higher as that of pCAT3-ASGPR1p.

Conclusions: HCV p7 can transregulate ASGPR1 promoter, and so can up-regulate the expression of ASGPR1 gene.

PP-136 Liver steatosis and treatment of hepatitis C viral infection
Gulnara Aghayeva*, Ali Hidayatov. Internal Diseases Department, Azerbaijan State Medical University

Objectives: There has been increasing evidence indicating metabolic disturbances in HCV infection, which would influence to pathogenesis and treatment of chronic hepatitis C.

Methods: We compared results of therapy with peglated interferon-alfa plus ribavirin in 79 patients (52%-male) with HCV. The excessive weight was estimated with body mass index (BMI). Patients were divided into 3 groups: 1st group with BMI < 25 kg/m² (27), 2nd group with BMI - 26-30 kg/m 2 (30), 3rd group with BMI> 30 kg/m² (22).

Result: After antiviral therapy 59 patients (74.6%) had achieved sustained virologic response SVR - 68.5% in genotype 1 (37 patients) and 88% in genotypes 2 and 3 (22). In the third group (BMI>30 kg/m²) was lowest level of SVR (55.6%). There were high authentic differences in each group among SVR rate in patients with and without liver steatosis (p<0.05). Patients without liver steatosis had SVR in 91% (1st group - 84.2%, 2nd and 3rd groups - 100%). Patients with steatosis achieved SVR in 45% (1st group - 37.5%, 2nd group - 70.6% and 3 group - 55.6%). All patients without liver steatosis in the third group had achieved SVR, on the other hand just 26.3% patients with steatosis in the same group had achieved SVR (p<0.05).

Conclusion: The presence of hepatic steatosis is risk factor in chronic hepatitis C patients. Improvement of the results of antiviral therapy correction concerning liver steatosis is necessary, both before as well as during the treatment of viral hepatitis C.

PP-137 The prognostic significance of hepatocyte growth factor activator in liver biopsies of Egyptian patients with HCV-related chronic hepatitis
Nermine Ehsan1,2, Doha Maher1,2, Rehab Samaka2,1, Hayam Alad1,2. 1National Liver Institute; 2Menoufiya University; 2Faculty of Medicine

Background: Hepatocyte growth factor activator (HGFA), is a pericellular activator of hepatocyte growth factor (HGF) which plays a potent role in liver repair after injury.

Objectives: The aims of this study were to investigate the immunostaining of HGFA in liver tissues from patients with hepatitis C virus (HCV) infection and to correlate its expression with the grade of activity, stage of fibrosis and immunohistochemical expression of transforming growth factor beta1 (TGF-β1).

Methods: Paraffin embedded liver sections prepared from 31 biopsies of patients with HCV-related chronic hepatitis (41±8 y) and 20 normal healthy subjects, donors for liver transplantation (29±7.5 y) were evaluated for grading and staging of chronic hepatitis according to Ishak scoring system and applied for immunostaining with HGFA and TGF-β1. Semiqualitative analysis of immunoreactive cells intensity and percentage for HGFA and TGFβ1 to interpretate were calculated the H-score.

Results: Liver tissue from HCV related chronic hepatitis revealed preferential distribution of HGFA around sites of injury and regeneration. HGFA H-score correlated significantly with the grade of activity and stage of fibrosis (p<0.01 each) and a highly statistically significant direct correlation between TGF-β1 H-score. There was a high statistically significant difference between nor-