Chris Kassianides, Chairman of the Gastroenterology Foundation of South Africa, in conjunction with EASL put together a whole day symposium of Liver talks at this year’s ASSA SAGES meeting in Durban. The Faculty included international speakers Professor Massimo Pinzani, Director of the UCL Institute for Liver and Digestive Health; Professor Tom Karlsen, leader of the Norwegian PSC centre and Molecular Hepatology at the University of Oslo; Professor Frank Tacke of RWTH Aachen University, where he is the leader of a molecular liver research laboratory; and Professor Fumni Lesi from Lagos, Nigeria. The local speakers were Corne Kruger, Mashiko Setshedi, Mark Sonderup and Wendy Spearman from Cape Town.

The morning session started with approaches to elevated transaminases and cholestasis – important basic concepts for Fellows in Gastroenterology and Hepatology to understand in order to develop an appropriate differential diagnosis when investigating a patient with liver disease. This was followed by talks on the standard evaluation (Prof Pinzani) and management (Prof Tacke) of NAFLD. Corne Kruger then gave a local perspective on NAFLD.

Obesity is increasing in southern sub Saharan Africa (sSA) with the highest incidence in South Africa where 13.5% of men and 42% of women are obese. It is important to recognize the morbidity and all-cause mortality associated with NAFLD and the need to treat the associated risk factors. NAFLD is an important cause of cryptogenic cirrhosis and is now recognized as a risk factor for the development of hepatocellular carcinoma.

The afternoon session concentrated on Viral Hepatitis. Mark Sonderup discussed screening and staging of Hepatitis C – including who to screen in the South African context and importantly staging as this determines duration of therapy with the new DAAAs as well as the need for ribavirin. Prof Tacke then discussed new DAA therapeutic options for HCV and emphasized the need to choose DAA combinations and treatment duration based on the presence of being treatment naïve or experienced; non-cirrhotic or cirrhotic (compensated or decompensated). In sSA, it will be important to have DAA combinations that are pangenotypic.

This was followed by a talk on Chronic Hepatitis B: whom to treat and new strategies for finite treatment. In sSA, where Hepatitis B remains endemic despite the availability of an effective vaccine, it is essential for all physicians to have a practical approach to HBV treatment. There has been a resurgence of interest in looking for a cure for Hepatitis B, which globally affects 400 million people. A cure requires loss of HBsAg and eradication of cccDNA. New therapeutic options aimed at finite treatment include combination therapy with tenofovir and pegylated interferon. Exciting future developments include drugs directed at various sites of the HBV lifecycle: inhibiting HBV entry by targeting the entry receptor, sodium taurocholate cotransporting polypeptide (Myccludex); targeting cccDNA (chromatin-modifying
enzymes); targeting viral RNA via siRNA (ARC-520); inhibiting nucleocapsid assembly (Bay 41-4109, NVR 3-778) and inhibiting HBsAg release (REP 9AC, REP2139-CA). Immunomodulation therapy in development include Toll-like receptor 7 agonists (GS-9620); Anti-PD-1 mAb (BMS-936559, CYT107) and therapeutic vaccines. Wendy Spearman gave an overview of HBV/HIV co-infection in Africa, which in contrast to the developed world outnumbers HCV/HIV co-infections. HIV promotes chronicity of HBV infection, liver fibrosis and increases the risk of hepatocellular carcinoma. Liver-related mortality is 2x higher in HBV/HIV than in HCV/HIV coinfections and HAART improves overall survival even in cirrhotics.

The last session of the symposium addressed the important topics of HCC screening, diagnosis and management (Prof Lesi), screening for portal hypertension and complications of cirrhosis (Prof Pinzani) and autoimmune liver disease (Prof Karlsen). Unfortunately, HBV despite being vaccine preventable, still remains the major cause of HCC in Africa. Patients tend to present late with inoperable disease and in many sSA countries, therapeutic options are limited. This talk emphasized the need for policies regarding regular screening and early diagnosis in order to have any therapeutic impact in patients presenting with HCC. Prof Pinzani gave an excellent overview of the efficacy of invasive and non-invasive methods of screening for portal hypertension - the development of portal hypertension has important prognostic and management implications. This was followed by an overview of the pathophysiology of portal hypertension and complications of cirrhosis, highlighting the concept of cirrhosis associated immune dysfunction (CAIDS) and that advanced chronic liver disease is the result of a chronic inflammatory syndrome and not just a simple haemodynamic disturbance. Importantly, B-blockers have been shown to decrease intestinal permeability and endotoxaemia, irrespective of the haemodynamic response and thus help to combat the inflammatory response.

The final talk addressed management of autoimmune liver disease (AIH, PSC and PBC). This area of Hepatology is usually neglected, there are few randomized control trials and Liver symposia tend to concentrate on viral hepatitis. In South Africa, AIH and PSC are frequent indications for liver transplantation. Patients with AIH often present late with established cirrhosis, so it is essential to have approach to the diagnosis and management including difficult to treat patients. There is no definitive medical therapy for PSC, dominant strictures should be dilated and stenting reserved for cases where inadequate biliary drainage is established. Ursodeoxycholic acid remains the standard of care in PBC. Obeticholic acid is being investigated for the treatment of both PSC and PBC.

Overall, the attendance was excellent, despite the last session competing with the rugby (South Africa against Argentina in Durban)! This is testament to the increasing interest in Hepatology that the Gastro Foundation has fostered through its Liver Interest Group meetings, AGA Postgraduate courses and now “Best of EASL in Africa” “Best of EASL in Africa” was a great success and we hope that this will become a regular feature at SAGES.

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