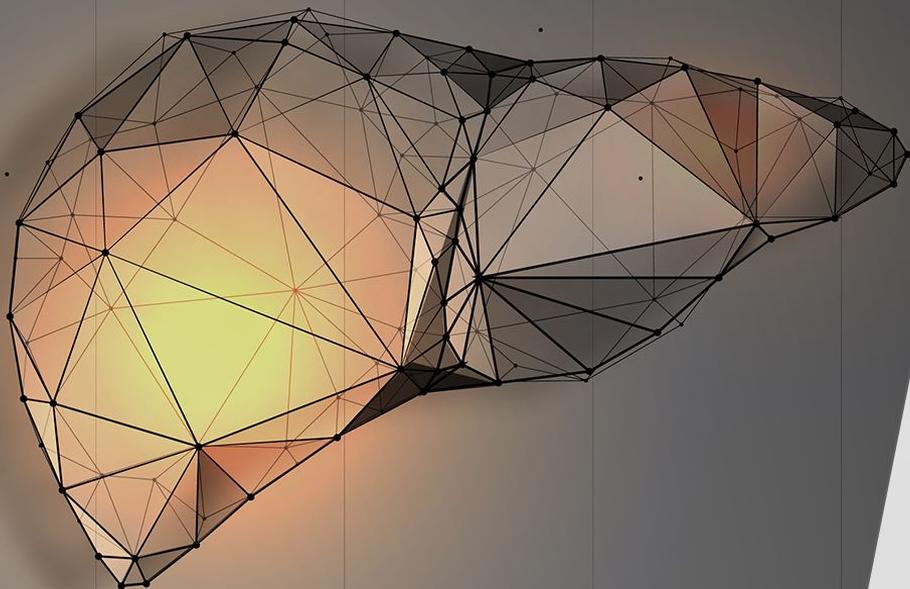


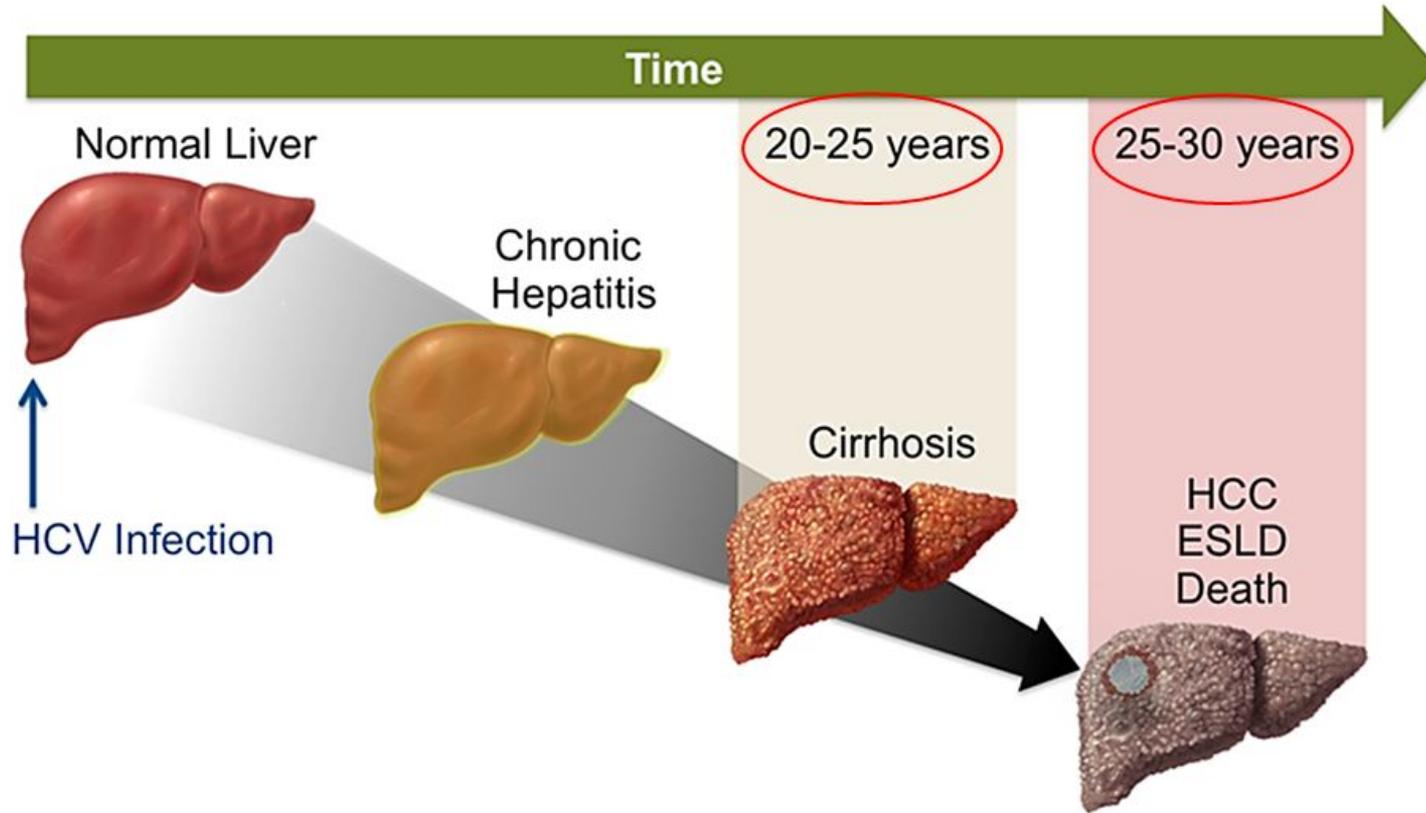
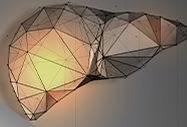
**LA REALTÀ ITALIANA DELLA CIRROSI  
EPATICA IN EPOCA PANDEMICA TRA  
TERAPIE E IMPATTO SOCIO ECONOMICO**  
*FOCUS TOSCANA*

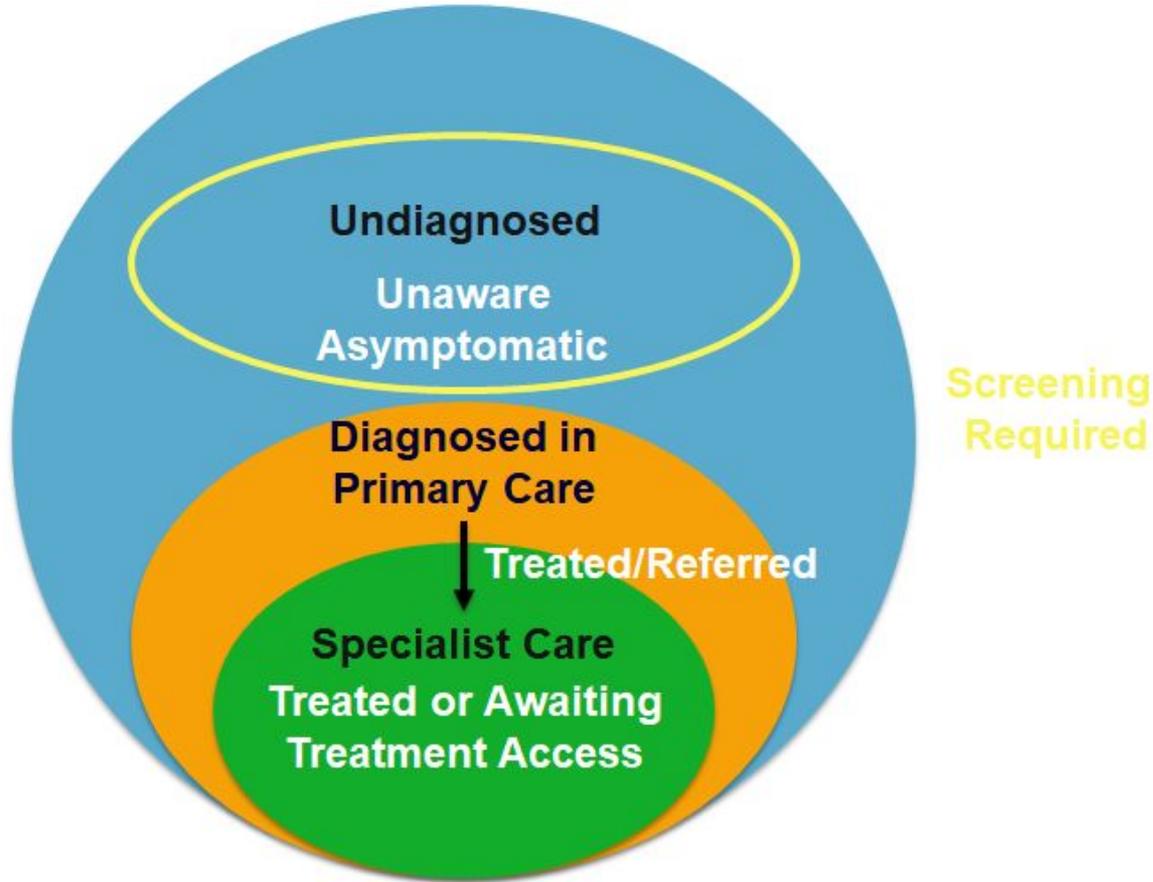
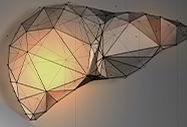
**VENERDÌ 5 FEBBRAIO 2021**



**Stefano Brillanti**

Professore di Gastroenterologia dall'Università  
di Siena - Direttore Epatologia del Policlinico  
Santa Maria alle Scotte, Siena



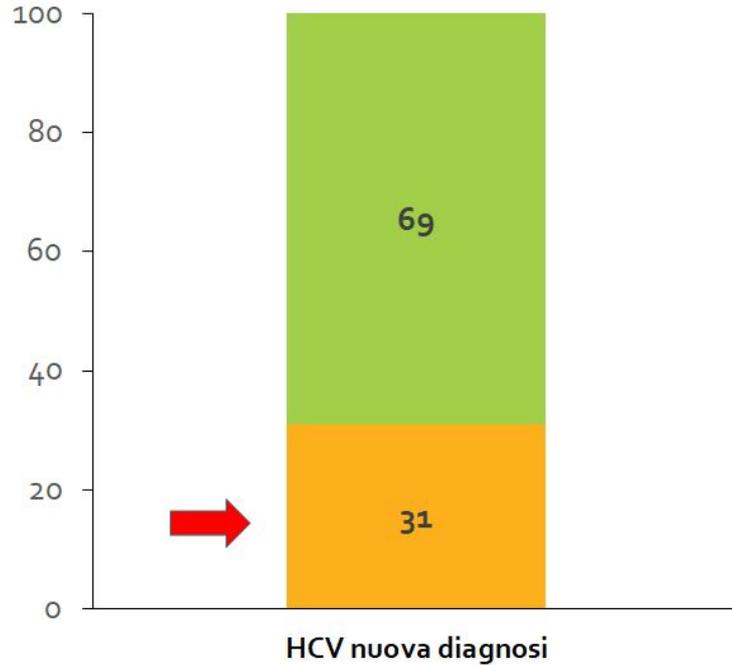


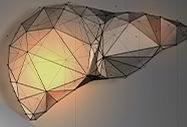


AOU Senese  
U.O. Epatologia

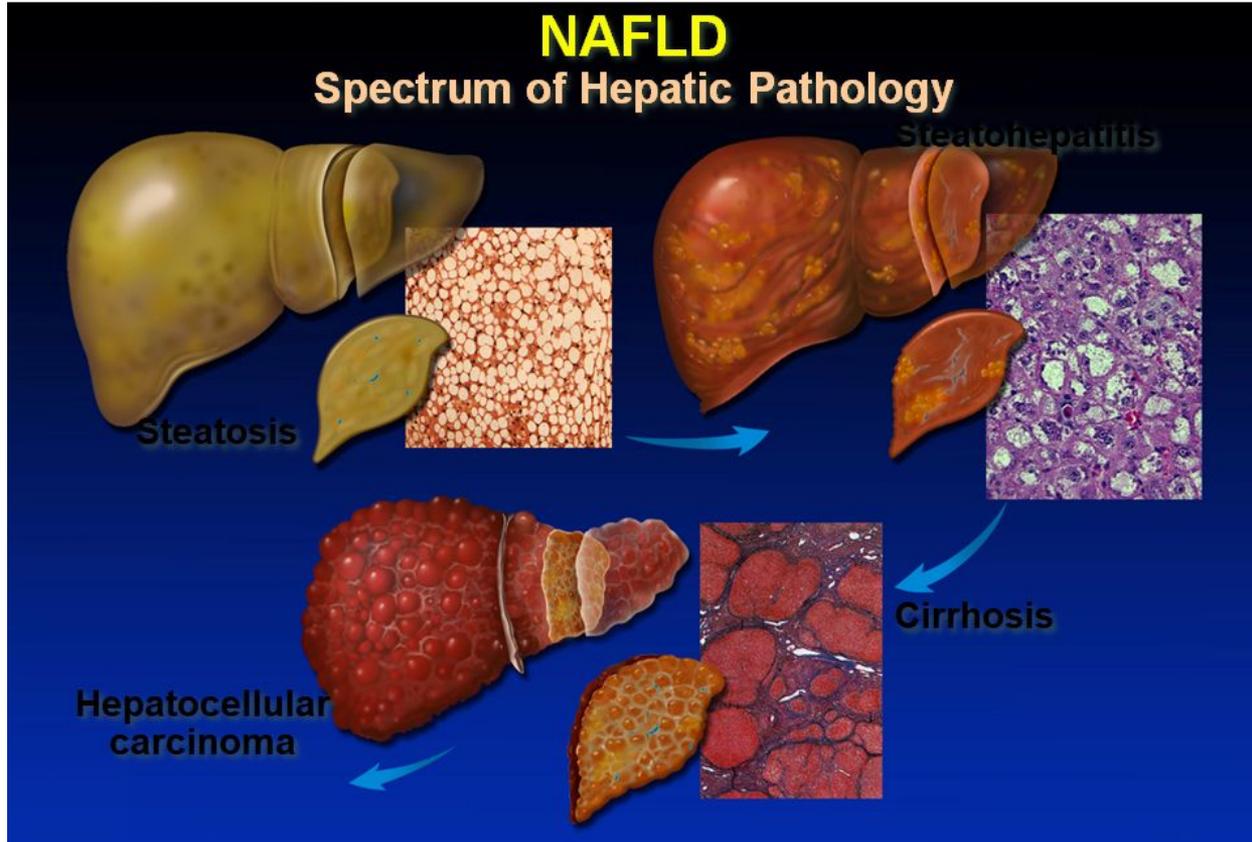
■ No DH/WS/Ricovero ultimi 2 anni

■ DH/WS/Ricovero ultimi 2 anni



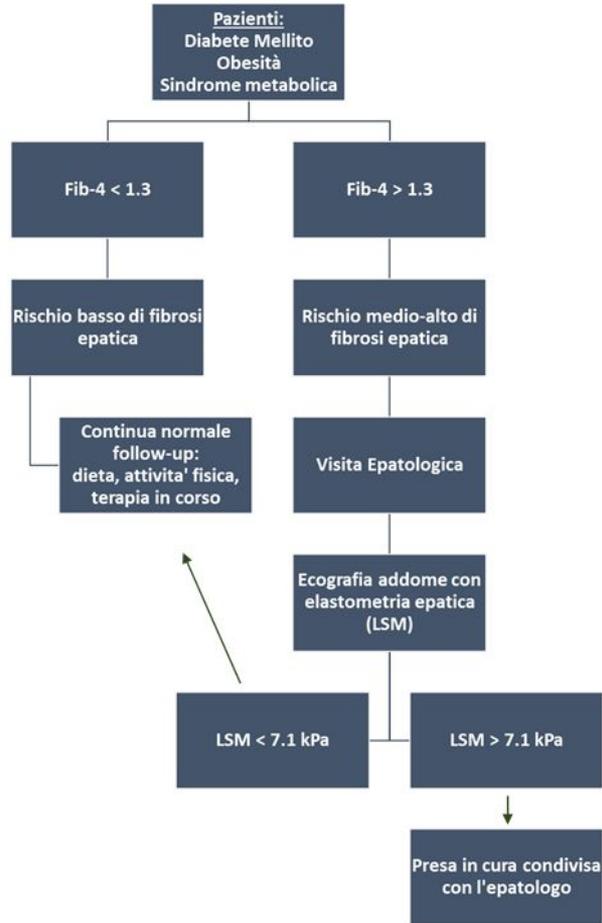


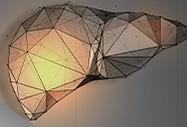
HCC Epidemiology



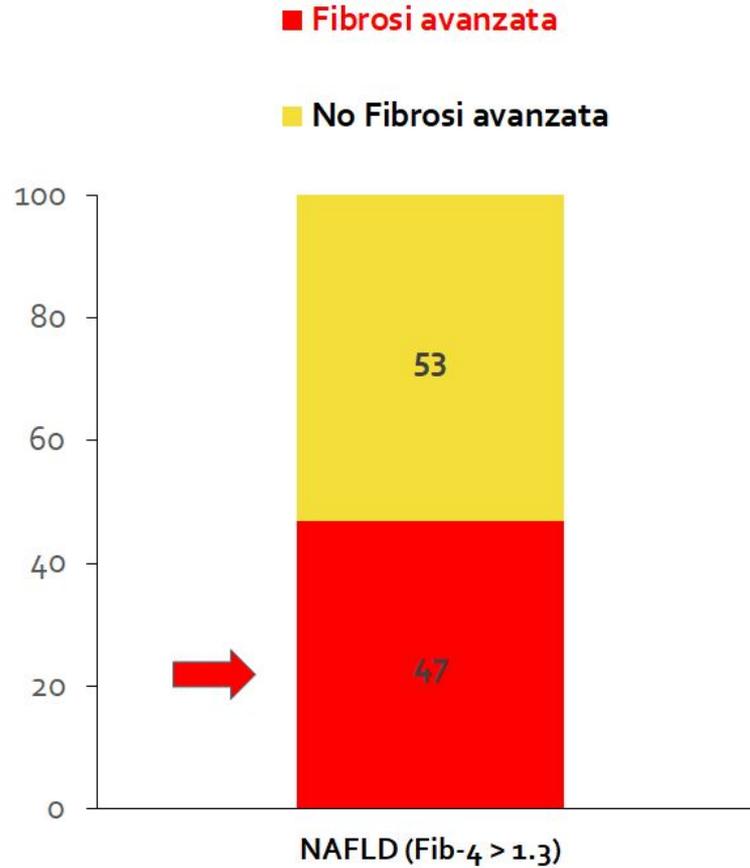


**AOU Senese**  
**U.O. Epatologia**





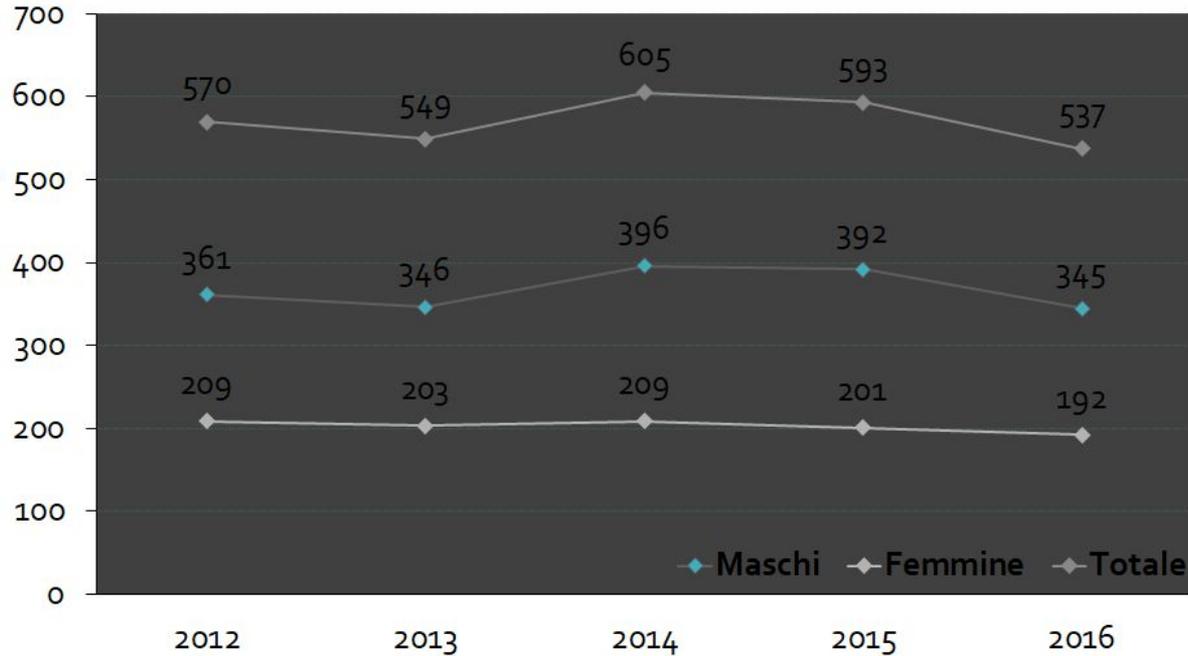
AOU Senese  
U.O. Epatologia



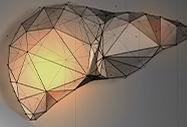


## Numero di morti per epatocarcinoma (HCC) in Toscana

(fonte ISTAT)

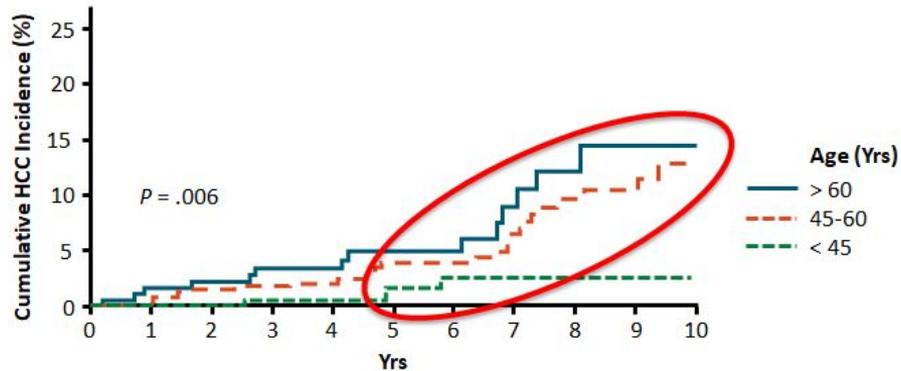


Brillanti S, 2019



## Persistence of HCC risk in cured HCV patients with F<sub>3</sub> or F<sub>4</sub> fibrosis

- Pooled analysis of people with bridging fibrosis or cirrhosis and SVR after HCV treatment with IFN (N = 1000)
  - After median follow-up of 5.7 yrs, n = 51 with HCC, approximately 1% annual risk



van der Meer. J Hepatol. 2017;66:485.



## Sorveglianza (screening) HCC

- **Chi:** tutti i pazienti con cirrosi epatica / fibrosi epatica F<sub>4</sub> (kPa > 12) indipendentemente dalla causa e tutti i pazienti con epatite cronica B anche se non cirrotici
- **Come:** ecografia addome + dosaggio alfafetoproteina (AFP)
- **Quando:** ogni 6 mesi
- **Dove:** centro di riferimento di secondo livello
- **Perche':** la diagnosi precoce di HCC allunga la vita del paziente

