In Reply

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Disclosures: The authors indicated no financial relationships.

Dear Editor,

It has been clearly shown that transarterial chemoembolization (TACE), although improving survival outcomes in hepatitis C virus (HCV)-related cirrhotic patients with unresectable hepatocellular carcinoma (HCC) [1], is often associated with a high rate of complications capable of impairing liver function and Child-Pugh score [2].

Dr. Torres and coworkers raise an additional issue in the management of patients receiving this treatment, asking the question as to whether or not TACE may result in a major increase in the HCV viral load that could worsen the underlying liver damage. To this purpose, they measured circulating HCV RNA levels in chronically HCV-infected patients with unresectable HCC before and after TACE sessions. Serum HCV RNA levels were measured before and within 6 months after TACE procedures. Because no significant changes were found, they concluded that this procedure does not lead to exacerbation of HCV replication and is not contraindicated in chronically HCV-infected patients.

Though not reported in our paper [3], we did assess HCV RNA levels 1 day before and 1–6 days (3 ± 1.16 days) after a TACE procedure in the whole cohort of 21 HCV-infected cirrhotic patients with intermediate HCC who received doxorubicin (50 mg) and mytomycin (10 mg). As shown in Figure 1, cumulative data showed that there was no significant increment in the circulating level of HCV RNA following a TACE procedure (0.31 ± 0.19 log IU/mL versus 0.35 ± 0.23 log IU/mL, respectively; $p = .5$).

While confirming and extending the data from Torres and colleagues, our results emphasize that HCV RNA levels are not significantly changed when measured within a few days after a TACE session and suggest that this procedure, having no major impact on HCV replication, can be safely applied to

Figure 1. Hepatitis C virus RNA levels before and after transarterial chemoembolization procedures.

HCV⁺ patients with HCC. Whether or not a rebound exacerbation of circulating HCV RNA levels may occur later on after the completion of the TACE treatment remains to be established.

AUTHOR CONTRIBUTIONS

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