

RECURRENCE OF HCV AFTER THE USE OF DIRECT ANTIVIRAL DRUGS: CLINICS, DIAGNOSIS, TREATMENT AND OUTCOMES

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Key words: extrahepatic manifestations, relapse, IFN + riboverine, retreatment of relapse HCV RNA genotype 1b.

Relevance. Viral hepatitis C is one of the leading liver diseases. According to WHO, 70 million people are infected with this disease. HCV kills 290,000 people every year. In 95% of patients, the disease becomes chronic, and the main complications are fibrosis and cirrhosis of the liver. In some cases, a relapse is observed, despite treatment with antiviral drugs. One of the most global problems of modern infectology remains the choice of effective treatment for chronic viral hepatitis C. The outcomes of chronic hepatitis C are very extensive - from minimal histological changes to the formation of cirrhosis and hepatocellular carcinoma. In recent years, approaches to the treatment of chronic viral hepatitis C have changed rapidly. This is due to a more in-depth study of knowledge about this disease, improvement of diagnostic and treatment methods.

Objective: To analyze the causes of relapses in patients with relapsed HCV, study retreatment regimens and demonstrate their effectiveness.

Materials and methods: The subjects of the study were 60 patients with chronic viral hepatitis C with relapse after antiviral treatment. Examinations are carried out at the Surkhandarya Regional Infectious Diseases Hospital and at the Welcom private clinic in Tashkent.

1. Collection of clinical and anamnestic data from patients.
2. Laboratory blood tests
 - detection of HCV RNA in blood plasma
 - detection of anti NS3, NS5 in the blood
 - Detection of anti- [HCV] _core-region.

- blood chemistry
- general blood analysis

Instrumental tests.

- USE
- Fibroscan

4. Liver biopsy.

- detection of HCV in liver cells.

Results and discussion. Chronic viral hepatitis C develops due to relapses after treatment with antiviral drugs. The causes of relapse, clinical and laboratory studies and the results obtained after re-treatment of patients with recurrent HCV make it possible to prevent relapses.

Conclusions: Adequate use of direct antiviral agents leads to a significant positive effect on the course of viral hepatitis and a sustained viral response in 100% of cases among patients. 2. Treatment with DAAs is recommended in accordance with the recommendations of the European Liver Association of 2016. 3. The use of DAAs for chronic viral hepatitis shows a high degree of effectiveness against fibrotic damage to liver tissue.

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