

## Risk of HBV liver disease in isolated antiHbc patients receiving immuno-chemotherapy for non Hodgkin lymphoma

We performed a retrospective study<sup>1</sup> in order to clarify the risk of HBV-related liver disease in a large number of isolated anti-HBc positive patients undergoing chemo-immunosuppressive therapy for non-Hodgkin's lymphoma. So far only limited case reports have been published about this issue and no data on HBV-related risk in this population was available.

While the need of antiviral prophylaxis is well established in HBsAg-positive patients undergoing any sort of chemo-immunosuppressive schedule this is not the case for isolated anti-HBc positive patients. In 2006 the American Society of Hematology suggested either antiviral prophylaxis or close monitoring with targeted therapy.<sup>2</sup> Moreover in 2007 the American Society for the Study of Liver Disease stated that there is not enough information to recommend antiviral prophylaxis in isolated anti-HBc positive carriers.<sup>3</sup> On the other hand the guidelines of the Italian Association for the study of liver disease<sup>4</sup> in 2007 and Barclays et al. in 2008<sup>5</sup> proposed the administration of universal prophylaxis both to HBsAg positive and HBsAg negative/anti-HBc positive carriers.

Alternatively to the interventional strategy (active drug prophylaxis) monitoring with HBV-DNA has been proposed. However we believe that, for isolated antiHbc carriers, HBV-DNA testing is not a cost/effective strategy neither a rationale approach. Sampling schedule would be arbitrary, thus not assuring timely and clinically efficient detection of a possible reactivation. Moreover

HBV-DNA methodology is not well diffused and standardized.

Certainly we want to guarantee the best clinical care to our patients and the prophylaxis strategy in isolated antiHbc patients is a rationale option. Nevertheless at the moment there is not clear evidence based consensus to administrate antiviral prophylaxis to this category of patients undergoing immuno-chemotherapy for non-Hodgkin's lymphoma.

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*Acknowledgments: we would like to thank the authors for their letter and the attention they reserved to this important problem which is coming now to clinical interest.*

*Haematologica 2008; 93:e66. doi: 10.3324/haematol.13750*

### References

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