



# GHAPP

Gastroenterology & Hepatology  
Advanced Practice Providers

## 2021 Fourth Annual National Conference

**September 9-11, 2021**

Red Rock Hotel – Las Vegas, NV



**GHAPP**

Gastroenterology & Hepatology  
Advanced Practice Providers

# HBV Therapeutic Goal

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# Disclosures

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# Disclosures

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**Jonathan Yeh, PA**

No financial relationships to disclose.

# Chronic Hepatitis B (CHB) in the World



## Key facts

- Hepatitis B is a viral infection that attacks the liver and can cause both acute and chronic disease.
- The virus is most commonly transmitted from mother to child during birth and delivery, as well as through contact with blood or other body fluids during sex with an infected partner, unsafe injections or exposures to sharp instruments.
- WHO estimates that 296 million people were living with chronic hepatitis B infection in 2019, with 1.5 million new infections each year.
- In 2019, hepatitis B resulted in an estimated 820,000 deaths, mostly from cirrhosis and hepatocellular carcinoma (primary liver cancer).
- Hepatitis B can be prevented by vaccines that are safe, available and effective.

# Chronic Hepatitis B in the World

## Key facts about hepatitis A, hepatitis B, and hepatitis C

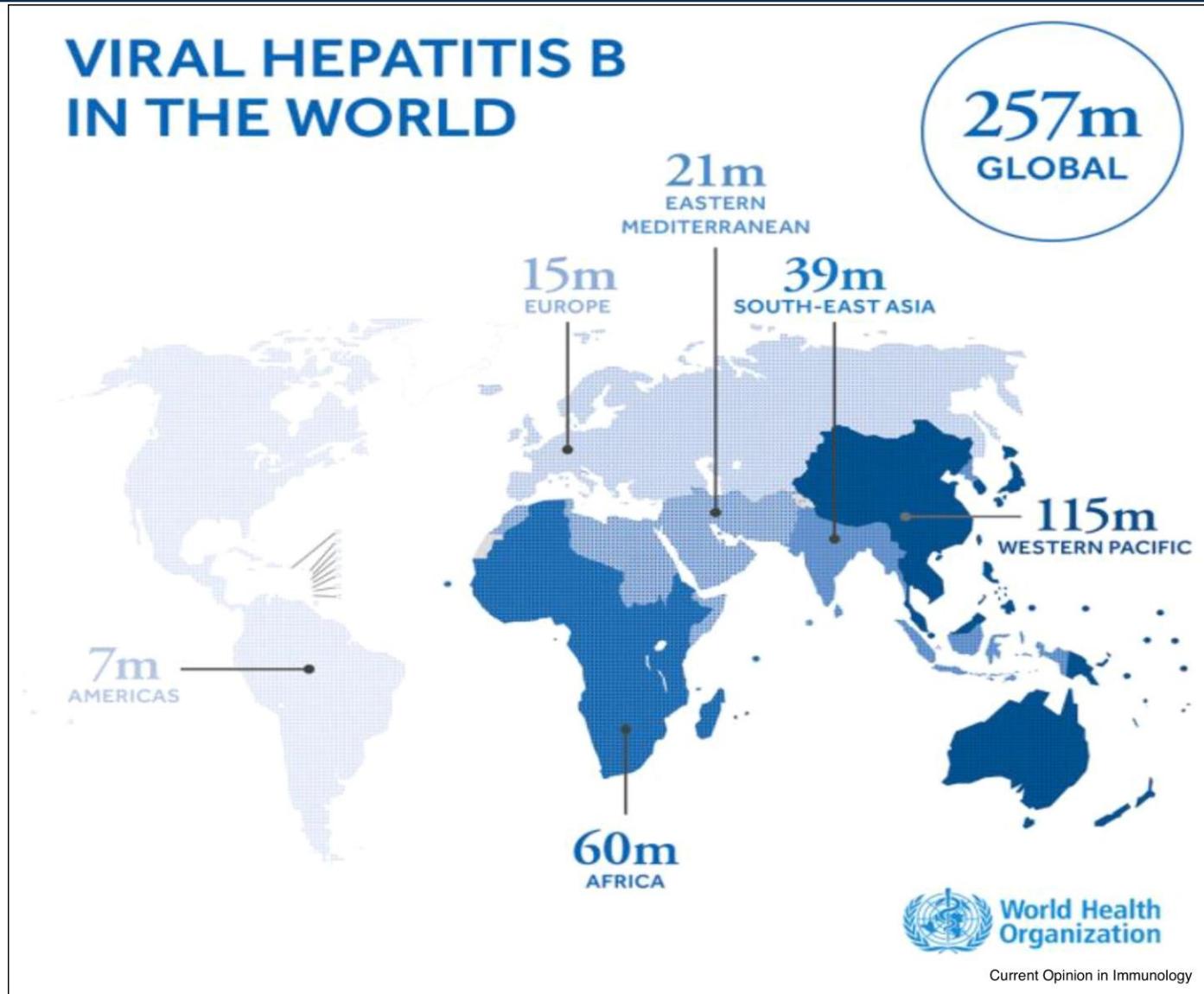
Characteristic	Hepatitis A	Hepatitis B	Hepatitis C
Main route(s) of transmission	Fecal-oral	Blood, sexual	Blood
Incubation period	15-50 days (average: 28 days)	60-150 days (average: 90 days)	14-182 days (average range: 14-84 days)
Symptoms of acute infection	Symptoms are similar and can include $\geq 1$ of the following: jaundice, fever, fatigue, loss of appetite, nausea, vomiting, abdominal pain, joint pain, dark urine, clay-colored stool, diarrhea (hepatitis A only)		
Perinatal transmission	No	Yes	Yes
Vaccine available	Yes	Yes	No
Treatment	Supportive care	Yes, not curative	Yes, curative

# Chronic Hepatitis B in the World

## UN Sustainable Development Goals

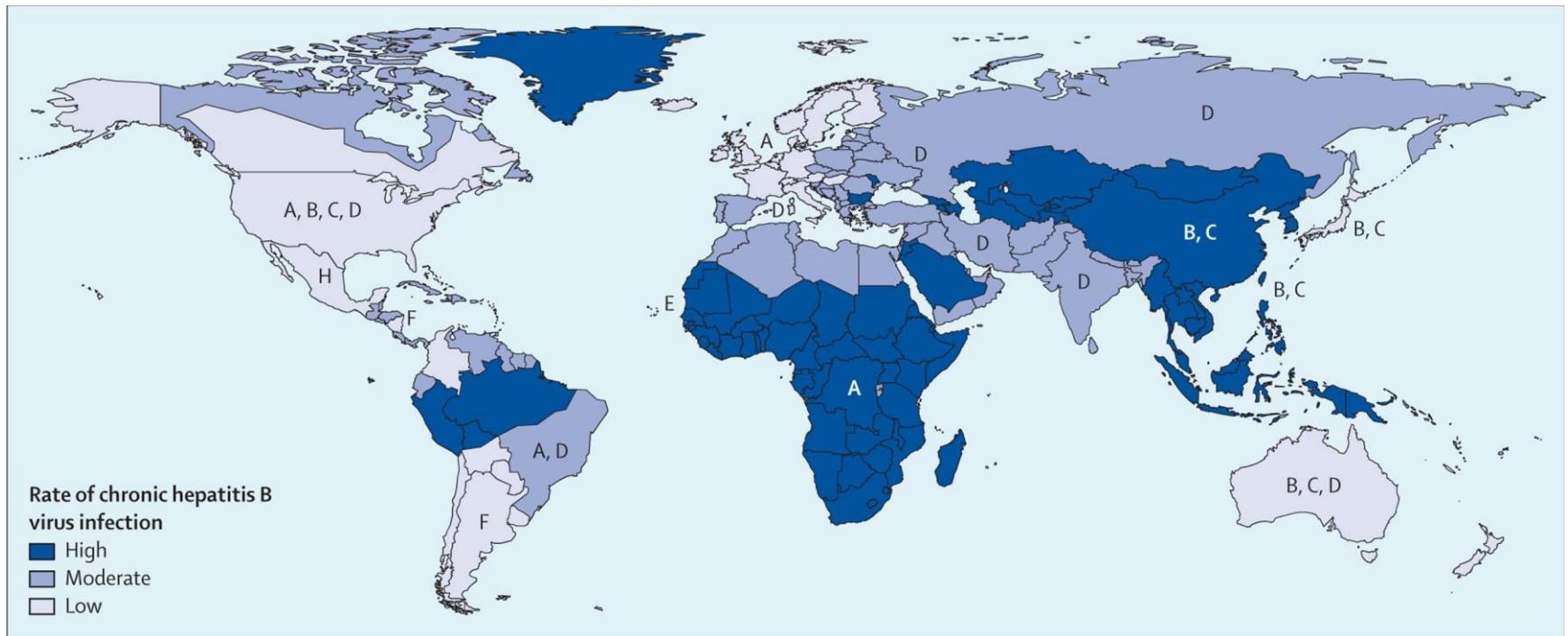
- 17 Goals for People, for Planet The Sustainable Development Goals are a universal call to action to end poverty, protect the planet and improve the lives and prospects of everyone, everywhere. The 17 Goals were adopted by all UN Member States in 2015, as part of the 2030 Agenda for Sustainable Development which set out a 15-year plan
- Under the third goal, the UN would like to see hepatitis, among other illness, epidemic ended by year 2030

# Chronic Hepatitis B in the World





# Genotype Distribution



# HBV Routes of Transmission

Blood And Lymphatic



Tattoos



Body Piercing



Health Care Worker



Mother to Newborn



Sexual Activity



Sharing Toothbrush, Razor



Homosexual

INFECTION WITH **HEPATITIS B** VIRUS

#104691626

# Chronic Hepatitis B in the United States

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## **CDC Data from 2018 shows:**

- About 2 in 3 people do not know being infected.
- 862,000 American living with CHB
- Asian American accounts for 58% of them.
- American Liver Foundation: 1 in 12 Asian Americans and Pacific Islanders infected with CHB.
- 15%-25% of chronically infected people develop chronic liver disease, including cirrhosis, liver failure, or liver cancer

# Chronic Hepatitis B Screening

## Who should get tested?

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- Nationals over 2% prevalence
  - IVD Users
  - Household members, sexual partners
  - Dialysis patients
  - Man – sex – Man
  - Sexually transmitted Infections, inc. HCV and HIV
  - Immunosuppressive therapies, certain cancer treatment
  - Pregnant women
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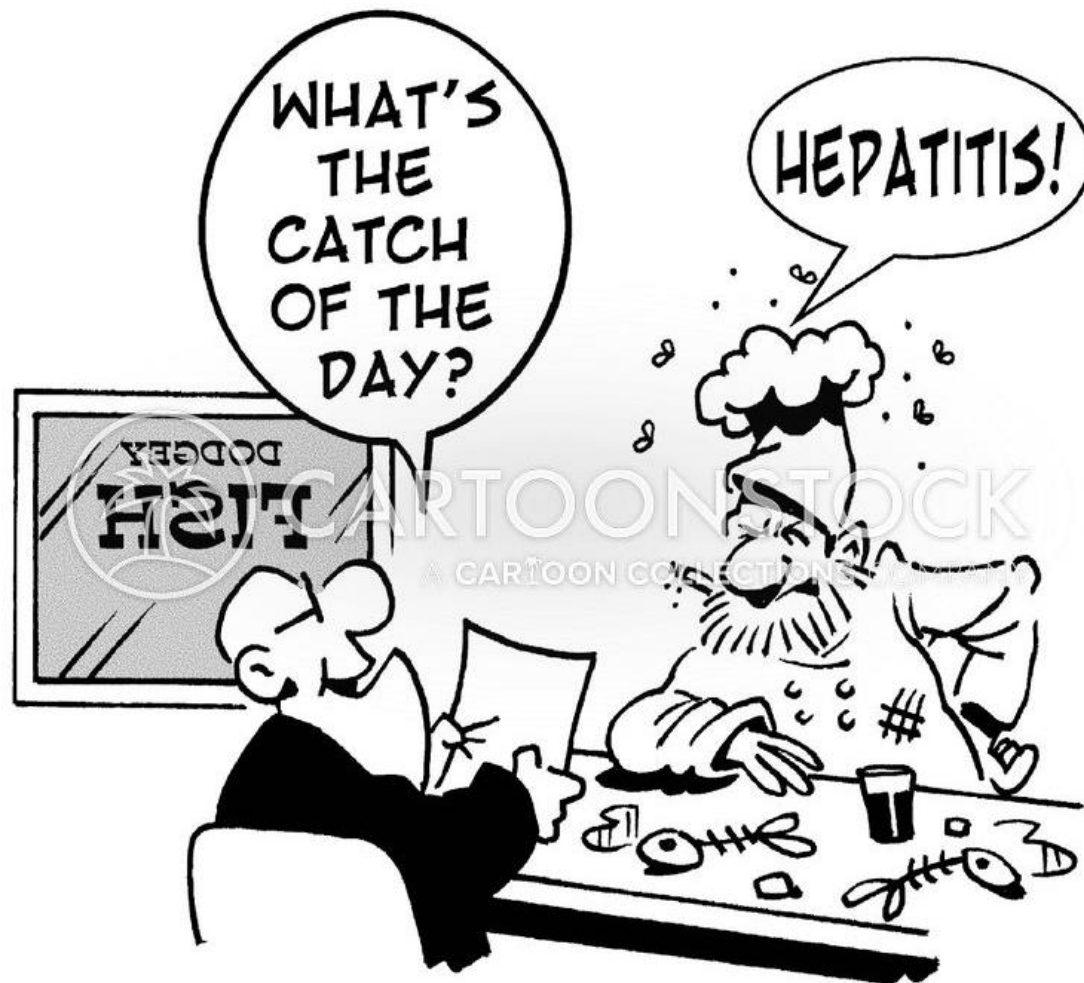
**Vaccinate if no immunity found – AASLD guideline**

# Chronic Hepatitis B Vaccines

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- Twinrix, Engerix-B, Heplisav-B
- Over 90% develop protective antibodies
- Other than Heplisav-B (approved 2017) vaccinated patients, response rate dropped to 75% after 60 year of age.

# Light Moment



# HBV Prevention

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## **Vaccination**

- According to latest WHO estimates, the proportion of children under five years of age chronically infected with HBV dropped to just under 1% in 2019 down from around 5% in the pre-vaccine era ranging from the 1980s to the early 2000s.

# Genotype Distribution

- Genotype A is found mainly in Northern Europe, North America, India, and Africa
- Genotype B and C are prevalent in Asia
- Genotype D is more common in Southern Europe, the Middle East, and India
- Genotype E is restricted to West Africa
- Genotype F is found in Central and South America
- Genotype G has been reported in France, Germany, and the United States
- Genotype H has been found in Central America
- Genotype I is found in Vietnam and Laos
- Genotype J was identified in the Ryukyu Islands in Japan



# HBV Genotype and Treatment Efficacy

## Response to Interferon treatment – eAg loss

- Prevalence of eAg positivity higher with B than C
- Higher among B vs. C and A vs. D

Kao JH, Wu NH, Chen PJ, Lai MY, Chen DS. Hepatitis B genotypes and the response to interferon therapy. *J Hepatol.* 2000; 33 (6): 998-1002. doi: 10.1016/s0168-8278(00)80135-x. PMID: 11131465; Wai CT, Chu CJ, Hussain M, Lok AS. HBV genotype B is associated with better response to interferon therapy in HBeAg(+) chronic hepatitis than genotype C. *Hepatology.* 2002; 36 (6): 1425-30. doi: 10.1053/jhep.2002.37139. PMID: 12447868; Erhardt A, Blondin D, Hauck K, Sagir A, Kohnle T, Heintges T, Häussinger D. Response to interferon alfa is hepatitis B virus genotype dependent: genotype A is more sensitive to interferon than genotype D. *Gut.* 2005; 54 (7): 1009-13. doi: 10.1136/gut.2004.060327. PMID: 15951551; PMCID: PMC1774609.

# It Must Be the Drink



# CHB Therapeutical Goal

## Current

- Virologic suppression
- Seroconversion
  - Loss HBeAg
  - Loss of HBsAg
  - Development of HBsAb
- early HBeAg seroconversion during treatment typically confers a favorable outcome. In contrast, late or absent HBeAg seroconversion leads to early cirrhosis

# CHB Therapeutical Goal

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## **Future**

- Virologic suppression
- Seroconversion
  - Loss HBeAg
  - Loss of HBsAg
  - Development of HBsAb

# Different Definitions of Virological Cure

	Complete Cure	Functional Cure	Partial Cure
cccDNA Eliminated	Yes	No	No
Integrated HBV DNA eliminated	Yes	No	No
cccDNA transcriptionally silent	Yes	Yes	No
HBsAg loss	Yes	Yes	No
HBV DNA Undetectable	Yes	Yes	Yes
Anti-HBs Positive	Yes	No/Yes	No
HBeAg Negative	Yes	Yes	Yes
Anti-Hbe Positive	Yes	Yes	Yes
Achievable Endpoint	Not Yet	Yes	Yes

# Novel Promising HBV Antivirals

Mechanism of action	Antiviral family	Drugs and delivery
Entry inhibitors	NTCP inhibitors	Myrcludex (Bulevirtide) (sc)
cccDNA disruptors	Gene editing: CRISPR/Cas9	Intravenous administration using vectors
	Epigenetic silencers	GS-5801 (sc)
Translation inhibitors	siRNA	ARC-520, ARB-1467, ARO-B (JNJ-3989), AB-729 (sc)
	ASO	RO-2931, GSK-9404 (sc)
	RNA destabilizers	AAB-452, RG-7834 (sc)
Capsid assembly inhibitors	Assembly disruptors	JNJ-440, JNJ-379, NVR-3778, ABI-H0731, ABI-H2158, AB-506 (oral)
	Core blockers	RO-4389, GLS-4 (oral)
Polymerase inhibitors	RT chain terminators	Tenofovir, entecavir, besifovir (oral)
Secretion inhibitors	NAPs	REP-2139, REP-2165 (sc injection planned)
ASO, anti-sense oligonucleotide; cccDNA, covalently closed circular DNA; HBV, hepatitis B virus; NAPs, nucleic acid polymers; NTCP, sodium taurocholate cotransporting polypeptide; sc, subcutaneous.		

# HBV Virus Life Cycle

HBV life cycle.

HSPG: heparin sulfate

proteoglycan; NTCP:

sodium/taurocholate

cotransporting polypeptide;

cccDNA: covalently closed circular DNA;

pdsDNA: partially doublestranded DNA;

POL-II: cellular polymerase II; RT: viral reverse transcriptase;

pgRNA: pregenomic RNA;

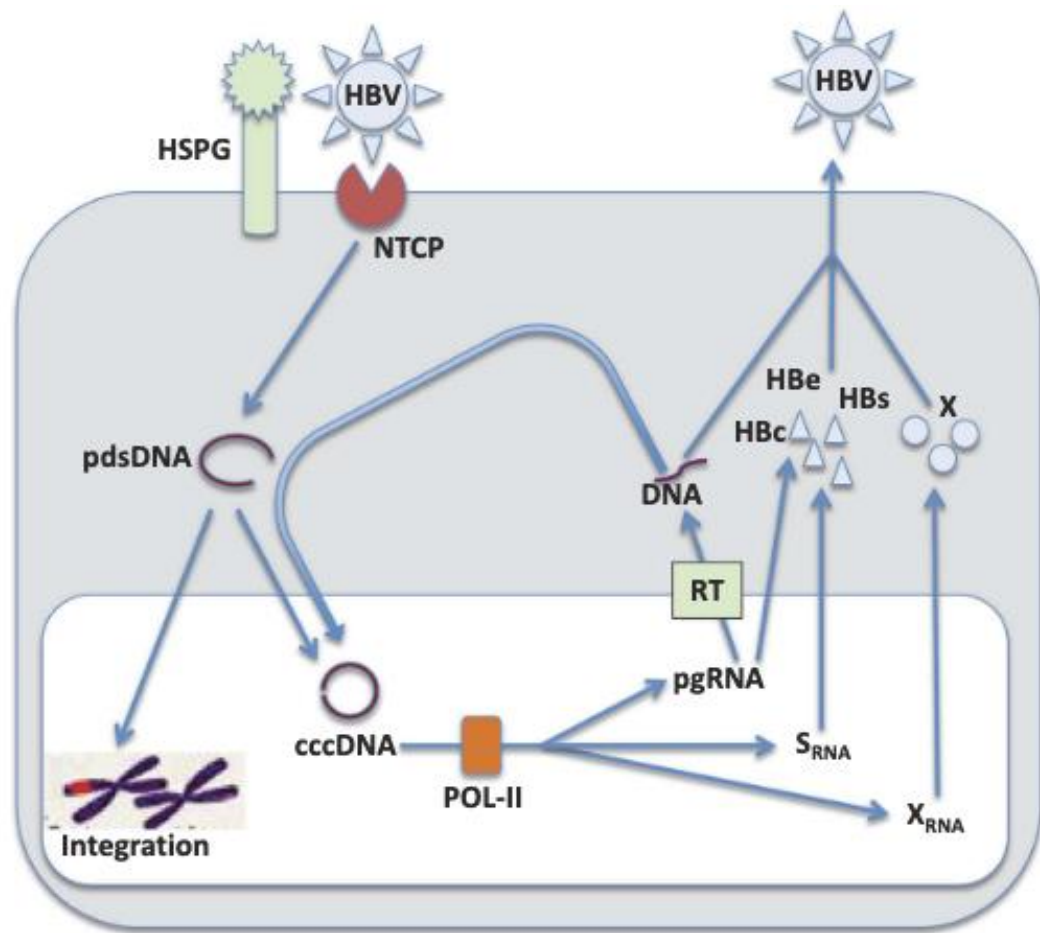
preS/SRNA: Surface messenger RNA;

XRNA: X messenger RNA;

HBV: hepatitis B virus;

HBc: capsid;

HBs: surface protein.<sup>4</sup>



# Novel Promising HBV Antivirals

Mechanism of Action	Anti-viral Family	
Entry inhibitors	NTCP Inhibitors	Bile acid transporter serving as functional HBV and HDV receptors <sup>1</sup>
cccDNA Disruptors	Gene Editing: CRISPR/CAS9 Epigenetic Silencers	Eliminating cccDNA by gene editing or silencing of epigenetic pathway (vs. mutation) for HBV <sup>2</sup>
Translation inhibitors	siRNA (RNAi)	interfering into RNA transcriptase <sup>3</sup>
	ASO	Antisense oligonucleotide to liver targeted therapy to reduce HBsAg production and viremia <sup>4</sup>
	RNA Destabilizers	Reducing HBsAg load <sup>4</sup>
Capsid Assembly Inhibitors	Assembly Disruptors	stopping the HBV virus from producing new virus before exiting a hepatocyte
	Core Blockers	
Polymerase Inhibitors	RT Chain Terminators	Blocking the enzyme polymerase during the reverse transcriptase phase of HBV virus in the DNA.
Secretion inhibitors	NAPs	Nucleic acid polymers blocks the secretion of HBsAg from HBV infected hepatocytes.



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# Safe Trip Home

