HEPATITIS C

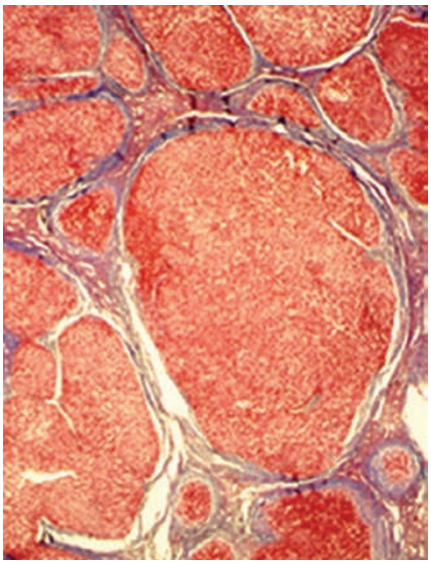
Angiotensin blockade—halting liver fibrosis

Administration of angiotensin-blocking agents might prevent the progression of liver fibrosis in patients with hypertension and chronic HCV infection, according to new findings.

The failure of currently available hepatitis C therapies to prevent the progression of liver fibrosis in a considerable number of patients with chronic HCV infection prompted the initiation of a study to evaluate alternative antifibrotic therapies. The study, led by Raymond Chung from Massachusetts General Hospital and Harvard Medical School, retrospectively examined the antifibrotic potential of angiotensin-blocking agents. "We were intrigued by the work in animal models that suggested angiotensin II activated hepatic stellate cells and that blockade of the angiotensin receptor attenuated fibrosis," explains Chung.

Liver biopsy samples from patients with chronic hepatitis C were analyzed for the presence of fibrosis. The patients were then evaluated for the presence of hypertension and use of antihypertensive medications to determine whether hypertension or antihypertension medications influence fibrosis stage. Although patients with hypertension had more liver fibrosis than those without hypertension, liver fibrosis was reduced in patients with hypertension who were taking angiotensin-blocking agents, compared with those with hypertension who were not taking such therapy.

The findings of this study are in line with findings from animal models and support the existence of a relationship between angiotensin blockade and attenuation of fibrosis. The researchers now hope to validate their findings in



prospective studies and randomized, controlled trials.

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Original article Corey, K. E. *et al.* The effect of angiotensin-blocking agents on liver fibrosis in patients with hepatitis C. *Liver Int.* **29**, 748–753 (2009).