1591. Hepatitis B outcome in coinfected HIV-HBV individuals in the tenofovir/emtricitabine era

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Background. Hepatitis B is an important public health issue in endemic areas, especially with the HIV epidemic. In the USA, hepatitis B and HIV coinfection represent approximately 6-10% of people living with HIV/AIDS. We report the experience with HIV-Hepatitis B-coinfected patients in our clinic

Methods. Of 1011 na•ve HIV patients enrolled at IDP from June 2004 to December 2011 who had available chart for review and who were started on antiretrovirals, those with HepBsAG+ were studied. Demographics, antiretroviral treatment and hepatitis B and HIV markers were abstracted. SAS9.2 was used for analysis. $p < 0.05$ was considered significant.

Results. There were 89HbsAg+ patients. Of those, 76(86%)were male, 73(82%) were black, and 58(65%) were men having sex with men or bisexuals. The age at HIV diagnosis was 34.4 years old. The majority 82 (92%) had a positive antigen at presentation to the clinic and 5 became positive during follow up. The baseline CD4 count was 87.16 + /-123 cells/mL. Among the 63(70%) with Hepatitis B viral load at baseline, 12(20%) had undetectable viral load and 32(51%) had high viral load (greater than 1 million). Among those, 48(55.2%) had an undetectable viral load at the last visit, and 7(8%) developed immunity with HepBsAb + ; among the 22 who had a HBsAb checked at follow up, a third (7/22)were positive; 6 of the 7 was on tenofovir/emtricitabine and 1 on emtricitabine containing regimen . Among those who had undetectable HepB viral load, 83% were on tenofovir/emtricitabine, and 10% on a lamivudine or emtricitabine-containing regimen. Among the 5 patients who became HbsAg+ after enrolling in the clinic, all were male and 3 received HepB immunization. One had acute HepB and resolved, another developed chronic HepB and became immune, another transferred care, and 2 had no further follow up on their HepB.

Conclusion. In the late antiretroviral era, half of the chronic active hepatitis B coinfected patients had undetectable hepatitis B viral load at the last follow up and 8% developed immunity. Further studies with more uniform hepatitis B markers in follow up will help determine if a large proportion of chronically infected patients on dual hepatitis B therapy will develop immunity. Greater efforts are needed to ensure susceptible patients are immunized for Hepatitis B.

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