

Iron Overload and Hepatitis C Virus Infection

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To the Editor: We read with interest the review by Zou and Sun on the iron accumulation linked to hepatitis C virus (HCV) infection.^[1] Whichever the mechanism for the overload, we would like to emphasize the important medical consequences of such accumulation; these encompass not only a worse prognosis of chronic hepatitis but also a higher risk of hepatocellular carcinoma (HCC),^[1] Type 2 diabetes,^[2] and heart failure/insufficiency.^[3] All these complications are now epidemiologically demonstrated to occur in patients with chronic HCV infection, but they were well-established consequences of excessive iron storage; this, in turn, may be a consequence of several viral diseases, as reminded by Zou and Sun.^[1] A very frequent complication of excessive iron deposits is infection by several bacterial species, including *Helicobacter pylori*. This pathogen is present worldwide, and found as coinfection in patients with liver cirrhosis and HCC; this association is highly frequent in China and Europe.^[4,5] *H. pylori* was shown to accelerate the progression toward cirrhosis and HCC, beyond its causative action in gastric cancer and peptic ulceration and bleeding. It is known the high risk of duodenal ulcer bleeding in cirrhotic patients; therefore, we suggest that the prudent physician should always test for the presence of *H. pylori* in all patients with chronic hepatitis, whether it is due to viral infections, iron overload, autoimmune diseases, or alcohol abuse.

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Conflicts of interest

There are no conflicts of interest.

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