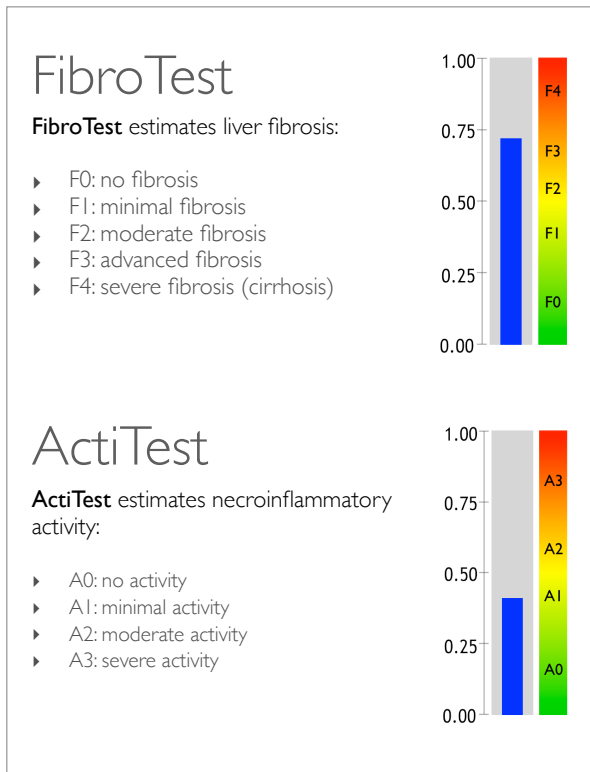




# FibroTest-ActiTest in HCV

## Estimating Fibrosis, Cirrhosis and Activity

Recognized by AASLD<sup>1</sup>, EASL-ALEH<sup>2</sup>, CASL<sup>3</sup>, APASL<sup>5</sup> and WHO<sup>4</sup> Guidelines



## FibroTest-ActiTest : access to care

FibroTest is recognized by the following guidelines for IFN-free HCV treatment access : AASLD<sup>1</sup>, EASL-ALEH<sup>2</sup>, CASL<sup>3</sup>, APASL<sup>5</sup> and WHO<sup>4</sup>.

## Diagnose before treatment

FibroTest evaluates both fibrosis in the early stages (F0 to F3)<sup>15</sup> as well as cirrhosis (F4). Cirrhosis can be fine-tuned to 3 levels:<sup>13</sup>

- **F4.1** (cut-off 0.74): cirrhosis without complications
- **F4.2** (cut-off 0.85): cirrhosis with oesophageal varices only
- **F4.3** (cut-off 0.95): cirrhosis with severe complications (primary liver cancer, bleeding or decompensation)

FibroTest offers the same diagnostic value regardless of ethnicity, gender, transaminases level, HCV genotype and viral load.<sup>8</sup>

ActiTest is more accurate for the diagnosis of necroinflammatory activity than ALT transaminases.<sup>9</sup>

## Follow-up after treatment

Cured patients still need to monitor their liver fibrosis and activity, to avoid the occurrence of related medical issues<sup>14</sup>, including cirrhosis (11% after 10 years) and complications or primary liver cancer (5% after 10 years).

### References :

1. AASLD/IDSA/IAS-USA. Recommendations for testing, managing, and treating hepatitis C 2015
2. EASL-ALEH Guidelines. J Hepatol 2015
3. Consensus guidelines from the CASL. Can J Gastroenterol 2012
4. Guidelines for the screening, care and treatment of persons with hepatitis C infection, WHO, 2014
5. Shiha G et al. Hepatol Int 2009
6. Chou R et al. Ann Int Med 2013
7. Houot M et al. Aliment Pharmacol Ther 2015 in press
8. Halfon P et al. Gastroenterol Clin Biol 2008
9. Poynard T et al. Gastroenterol Clin Biol 2010
10. Poynard T et al. Clin Chem 2010
11. Castera L et al. Hepatology 2010
12. Poynard T et al. Clin Res Hepatol Gastroenterol 2014
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	FibroTest	Transient Elastography	APRI	FIB-4
<b>Applicability</b>	■	■	■	■
<b>Performance F0-F3</b>	■	■	■	■
<b>Performance F4</b>	■	■	■	■
<b>Inflammation False Positive</b>	■	■	■	■
<b>Cost</b>	■	■	■	■
<b>Prognosis</b>	■	■	■	■

FibroTest benchmark in direct comparisons, in intention to diagnose<sup>7</sup>

« FibroTest is more effective and less costly than liver biopsy. »

Liu S et al, Plos One 2011

**Assays (done at local lab) :** Alpha-2 macroglobulin, Haptoglobin, Apolipoprotein A1, Total bilirubin, GGT, ALT, age, sex - according to BioPredictive precautions of use (biopredictive.com)

Find all the scientific publications of BioPredictive non-invasive tests on the website:

library.biopredictive.com

**BioPredictive S.A.**  
218 Boulevard Saint-Germain  
75007 PARIS - FRANCE  
Tel : +33 1 84 79 23 90  
contact@biopredictive.com

