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## Features of clinical and biochemical changes and indicators of APRI and FIB-4 in patients with chronic viral hepatitis C

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**Background.** Chronic viral hepatitis C (CVHC) is a common and dangerous liver disease. Viral liver damage progresses from inflammation to the development of fibrosis and cirrhosis. The degree of liver fibrosis is important for determining therapeutic tactics and further observation.

**Objective.** Define the features of the clinical course, laboratory changes, APRI-test and FIB-4 scores in patients with CVHC.

**Methods.** 287 CVHC patients, divided into three groups by genotypes (1b, 2, 3a), and 55 healthy individuals were examined. The calculation of the APRI-test and FIB-4 scores was carried out using the Android application developed by us. Statistical processing was carried out in Microsoft Office Excel 2010 and IBM SPSS Statistical 23.

**Results.** The study showed that young people (47.74 %), men (66.20 %), those with genotype 1b (52.3 %), moderate liver fibrosis (F2 – 31.25 %) and minimal process activity (73.17 %) ( $p < 0.05$ ) prevailed among the patients with CVHC. Asthenic-vegetative syndrome (81.88 %) and enlarged liver (76.26 %) ( $p < 0.05$ ) were the most common diagnoses. An increase in the number of lymphocytes, ESR, ALT, AST and GGT levels relative to the indicators of the comparison group ( $p < 0.05$ ) was also observed.

Patients with genotype 1b, as compared to the total sample, were more frequently diagnosed with telangiectasias, glomerulonephritis, those with genotype 2 – with ischemic heart disease (IHD) and cardiofibrosis, and less often – with an enlarged liver ( $p < 0.05$ ), anaemia was not observed. The patients with genotypes 1b and 2 had higher protein levels, alkaline phosphatase levels were lower in patients with genotype 1b and 3, and creatinine levels – in those with genotypes 1b and 2 ( $p < 0.05$ ).

In the total sample, the FibroTest for METAVIR correlated with the APRI test (0.71 (0.44–1.37);  $P = 0.426$ ;  $p = 0.000$ ) and FIB-4 (1.55 (0.98–2.65);  $P = 0.558$ ;  $p = 0.000$ ). The De Ritis ratio only correlated with FIB-4 ( $P = 0.431$ ;  $p = 0.000$ ).

**Conclusions.** Asthenic-vegetative syndrome, enlarged liver, increased number of lymphocytes and elevated ESR and transaminases were the most prevalent clinical and laboratory features. Telangiectasias and glomerulonephritis were more commonly observed in genotype 1b, IHD and cardiofibrosis – in genotype 2, whereas anaemia was not observed. Elevated blood protein levels were diagnosed in patients with genotypes 1b and 2, decreased alkaline phosphatase levels – in those with genotypes 1b and 3, and creatinine levels – in those with genotypes 1b and 2. All non-invasive methods for diagnosing liver fibrosis correlated with each other.

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