## Epidemiological, virological and clinical profile of HBsAg positive individuals in Italian hospital settings: interim results of the HBV/HDV PITER cohort

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**Introduction:** The increasing flows of migrants from endemic area is changing the burden of HBV infection in Italy in the last few decades.

**Aim:** We aimed to evaluate the epidemiological, virological and clinical profile of HBsAg positive subjects in order to update the HBV epidemiology in the hospital setting and the natural history of chronic HBV infection in a multi-ethnic context.

**Method:** Consecutive HBsAg positive patients were enrolled during 2019-2021 in the PITER cohort from 41 Italian clinical centers.

**Results:** 3141 patients (75.5% Italian and 25.5% non-Italian native) were enrolled; mean age: 58 years (range 16-93); 62% male; 73% genotype D, 65% in ongoing treatment. The 2 cohorts differed significantly (p=0.000) for gender: female 36.0% vs 48.1%, HBV genotype D: 80.0% vs 57.6%, HBeAg positivity: 4.5% vs 1.9% in Italian vs non-Italian natives, respectively. Italian patients were older (median 61 y vs 48 y p=0.0001) had more severe liver disease: cirrhosis 22.0% vs 4.0%, HCC 5.0% vs 1% p=0.000, higher rate (p=0.000) of liver disease cofactors and comorbidities mainly

steatosis (25.1% vs 15,1%), cardiovascular disease (28.6% vs 9.0%), dislipidemia (10.4% vs 5.2%), diabetes (10.2% vs 3.7%). Anti-HDV was tested in 76% of patients and it was positive in 8% (7.5% Italian vs 9.5% non-Italian natives). Median age of HBD/HDV patients was 55 years (range 21-80); 65% had cirrhosis, 13% had HCC. HDV-RNA was tested in 72% of anti-HDV positive patients: HDV RNA was positive in 61% of them. 79% of the HDV-RNA positive patients were mostly on NUCs treatment (90%).

**Conclusion:** Significantly different HBV epidemiological, virological and clinical profiles have been observed in Italians versus non-Italian native patients by demographic, infection/coinfection and comorbidity patterns. Such evidences underline the need of updated healthcare strategies for an effective control of HBV infection, well diagnostic and treatment algorithms for an appropriate management of HBV and HBV/HDV patients.