

Broad negative impact of hepatitis C virus infection in oncohematological patients

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Hepatitis C virus (HCV) infection is a significant health issue that leads to chronic hepatitis, liver cirrhosis and hepatocellular carcinoma. A vaccination for HCV has not been developed so far. However, in the last decade, effective directly-acting antiviral (DAA) therapies have been developed, enabling HCV eradication in c.95% of infected patients.

Due to the increased exposure to the virus in oncohematological patients, the prevalence of HCV infection in this population exceeds that of the general population. The advent of highly effective DAAs has given hope that HCV infections could soon be eliminated as a global health problem. Nevertheless, since most of these infections remain asymptomatic for a long time, mass screening is needed in addition to effective treatment. It is estimated that c.140,000 people in Poland infected with HCV are living without knowing about the underlying danger.

HCV infection in patients with B-cell non-Hodgkin lymphoma (B-NHL) is of particular interest, as the virus can perform its oncogenic role indirectly through modulation of the host's immune system. The most convincing evidence of the role played by HCV in the development of B-NHL comes from observations of lymphoma regression in indolent NHL patients after antiviral treatment, as well as increased anticancer treatment outcomes following DAAs therapy.

Having considered these facts, Polish experts have developed guidelines for the diagnosis and treatment of HCV in oncohematological patients, which are published in this issue of "Acta Haematologica Polonica" [1]. While special interest is paid to B-NHL, other hematological

malignancies, and HCV's impact on their clinical course, are also examined.

With great sadness, we announce that Professor Janusz Kłoczko passed away at the end of 2023. His lifetime of achievements is described elsewhere in this issue by his close colleague Prof. Jarosław Piszcz [2].

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Conflict of interests

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