Title:

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Better prognosis of HCV patients diagnosed and treated with automatic alert system

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Dear Editor:

I have read with interest the article published by Mateu et al.(1) "Results of an automatic alert system from Microbiology to connect diagnosis and treatment in patients with hepatitis C virus" published in your journal, in which they report that an automatic alert system from microbiology could identify patients with hepatitis C virus at an early stage so that they can receive timely treatment. In relation to which I make the following comments on certain aspects of the article.

First of all, it is important to emphasize that the article presents useful information for the implementation of automated alert systems in microbiology services for an early diagnosis of the hepatitis C virus and to receive appropriate treatment for its comorbidities. Although it would have been interesting to specify the pharmacological therapy that the patients received.

It is essential to emphasize the treatment scheme given to the patients due to the high sustained viral response mentioned in the study, which with a scientific basis can contribute to various investigations or health centers when having patients with clinical characteristics such as coinfection with HIV, hepatocellular carcinoma, advanced fibrosis (F3-F4) and decompensated cirrhosis.

According to the American Society for the Study of Diseases, simplified treatment is established with sofosbuvir/velpastavir for 12 weeks or Glecaprevir/pibrentasvir for 8 weeks. However, certain specific considerations must be taken into account for concomitant pathologies (2). A specific case would be the pharmacological indication

for decompensated cirrhosis in which the use of Glecaprevir is contraindicated due to its toxic effects in this type of patient (3).

On the other hand, in patients with HIV it is necessary to perform a complete pharmacological history before starting the treatment for the Hepatitis C Virus due to the possible drug interactions, which are detailed by the HEP Drug Interactions of the University of Liverpool (4).

Therefore, having an automatic alert system could improve the prognosis of patients by giving an early diagnosis, taking into account the concomitant pathology to indicate the specific treatment for the purpose of reaching the resolution of the viral infection.

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