



بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ



شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم



شبكة المعلومات الجامعية

جامعة عين شمس

التوثيق الالكتروني والميكرو فيلم

قسم

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**PREVALENCE OF HEPATITIS B . C & BILHARSIASIS IN
PATIENTS WITH HEPATOCELLULAR CARCINOMA**

THESIS

Submitted in Partial Fulfilment of Master Degree in General Medicine

BY

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Faculty of Medicine

1999

عبد الفتاح
محمد
الشيخ
الشيخ

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بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

وَقُلْ أَعْمَلُوا فَسِيرَ اللَّهِ

عَمَلَكُمْ وَرَسُولِهِ وَالْمُؤْمِنُونَ

صَدَقَ اللَّهُ الْعَظِيمُ

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Tariq Mohammed Heikal

1999

**Introduction
and
Aim of the Work**

INTRODUCTION

The incidence of hepatocellular carcinoma (HCC) has been increasing world wide over the last years . The major risk factor for HCC are reported to be the carrier state of Hepatitis B virus (HBV) and cirrhosis of the liver . However , as the carrier rate of Hepatitis B virus (HBV) has been decreasing, this trend of an HCC increase might be attributable to chronic Hepatitis and cirrhosis caused by Hepatitis C virus (HCV).^(Ref. 2)

In fact HCC often occurs in patients with chronic HCV infection, and anti-HCV has been found frequently in affected patients . Thus HCV infection probably is associated with hepatocellular carcinogenesis.^(Ref. 3)

Although knowledge about HCV is growing rapidly , no clear relation has yet been established between HCV infection and HCC development. It also remains uncertain whether HCV plays a direct or indirect role in hepatocarcinogenesis .^(Ref. 1-2)

Aim of the work

The main aim is to study the prevalence of Hepatitis B, C & Bilharsiasis infection in patients with Hepatocellular carcinoma .

**Review
of
Literature**

Hepatocellular carcinoma

Epidemiology

Tumors of the liver represent one of the most common malignancies in the world. The annual international incidence of the disease is about 1 million cases, with male to female ratio of about 4:1. (*Parker SL, et al, 1996*).

Hepatocellular carcinoma has one of the greatest geographic variations of any major cancer. Although rare in the *United States* and *Western Europe*, liver cancer is one of the most common neoplasms in *Eastern Asia* and *Sub-Saharan Africa*, because of the large populations in these regions. (*Parkin D, et al, 1993*).

Among the areas listed in *Cancer Incidence on Five Continents*, *Qidong, China*, and *Khon Kaen, Thailand* have the world's highest rates, at 89.9/100,000 and 90.0/100,000, respectively. Forty-four percent (44%) of the world's cases occur in *China* alone. (*Parkin D, et al, 1993*). *Ireland* and the *United Kingdom* have rates that are among the lowest - 1.1/100,000 and 1.4-2.0/100,000, respectively. (*International Agency for Research on Cancer. 1992*).

In *United States* approximately 15,400 new tumors of the liver and biliary passages are diagnosed each year, with 12,300 deaths estimated annually. (*Parker SL, et al, 1996*). About half of these tumors are of the gallbladder, a third are due to tumors of the intrahepatic and extrahepatic biliary ducts, and the remainder are primary hepatocellular carcinomas (HCCs). Accounting for approximately 4000 to 6000 cases per year in the United States. (*Tabor E, et al, 1991*).

In 1985, the crude incidence rates of hepatocellular carcinoma in *North Africa* were estimated to be 4.1/100,000 for males and 2.1/100,000 for females. The corresponding estimated age-standardized rates per 100,000 were 7.0 and 3.3, respectively (*Parkin et al., 1993*).

According to WHO database, the overall annual age-standardized mortality rates for hepatocellular carcinoma in *Egypt* (1985-1987) were 4.1 and 2.4/100,000 for males and females respectively (*Levi et al., 1994*). As the case mortality rate of hepatocellular carcinoma is nearly 100%, the death rates very closely reflect the natural incidence of the disease. However, these observations have to be taken with the utmost caution as the exact