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# HBV Forum 2

## April 18<sup>th</sup> 2017

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# HDV RNA and Anti-HDVAg Testing in Europe

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Avicenne Hospital



French National Reference Laboratory  
For Hepatitis Delta virus



# HDV-RNA and anti-HDV-Ag Testing in Europe

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French National Reference Laboratory for HDV

Clinical Microbiology Laboratory

University hospital of Paris Seine-Saint-Denis Bobigny, France

INSERM U955 Team 18 – Creteil, France

# • FNRL for HDV

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**Ségolène Brichler (PharmD, PhD)**

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**Zahia Ben-Adbdesselam (M2/CRA)**

**Chakib Alloui (MD)**

**Dominique Roulot (MD, PhD)**



**Avicenne Virology Unit  
French National Reference Laboratory  
For Hepatitis Delta virus**



**Avicenne Hospital**



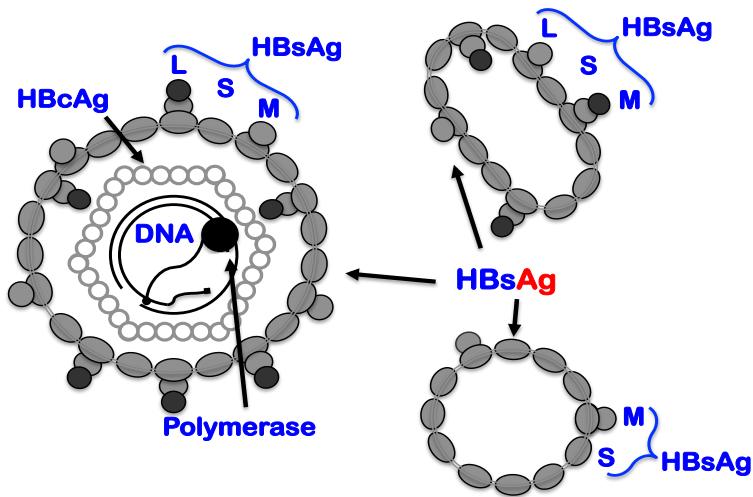
# **Disclosures**

- Speakers on a time-time basis for:
  - BMS, Gilead, Qiagen, Siemens
- Invitation to scientific congress:
  - BMS, Gilead, Qiagen, Eurobio
- Consulting & scientific assistance :
  - Bioactiva diagnostics GmbH
  - Eurobio

# **HDV Infection**

Occurs only in  
patients infected  
with **H B V**

# Viral particles

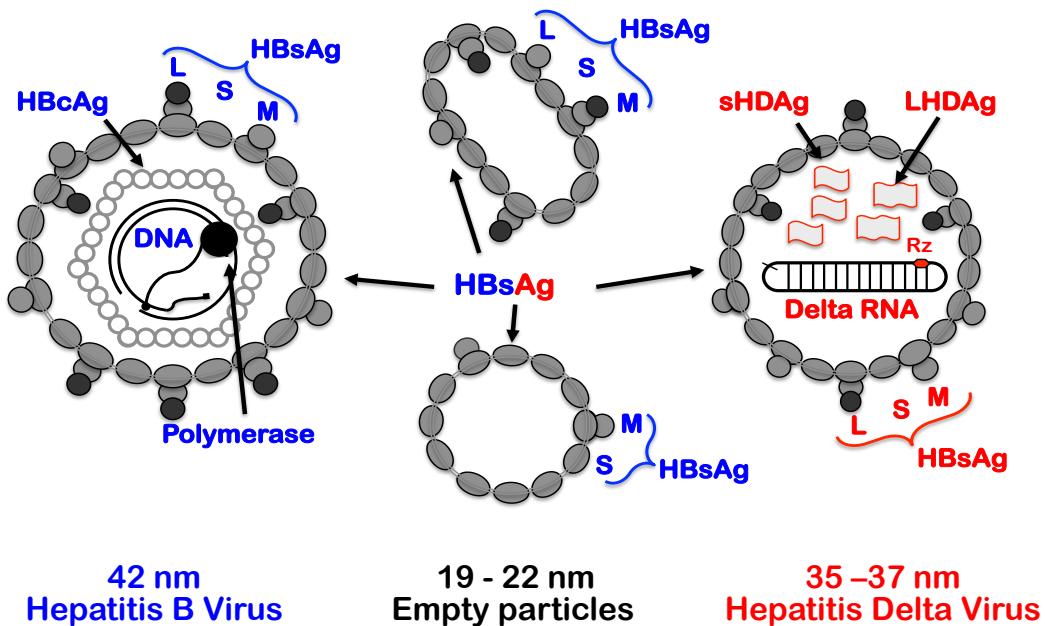


42 nm  
Hepatitis B Virus

19 - 22 nm  
Empty particles

# Viral particles

## HDV Satellite of HBV



# Main characteristics of HDV

- HDV belongs to the satellite virus family
- Genome: negative circular single stranded RNA of  $\approx$  1.7 Kb with 60% of GC content  $\rightarrow$  high intramolecular base pairing (74%)
- Replication by a double rolling circle mechanism, involving a ribozyme region in its genome & host RNA polymerases (RNA Pol I, II & III)
- Only one coding ORF situated on the antigenome,
- One mRNA
- Two Proteins : sHDAg and LHDAg  $\rightarrow$  *Editing* mechanism of the antigenome involving the human ADAR-1
- Its envelope is provided by HBV, involving an isoprenylation of the LHDAg by a cellular farnesyl transferase
- HDV is characterized by a high genetic variability (8 (sub)genotypes)

# Epidemiology

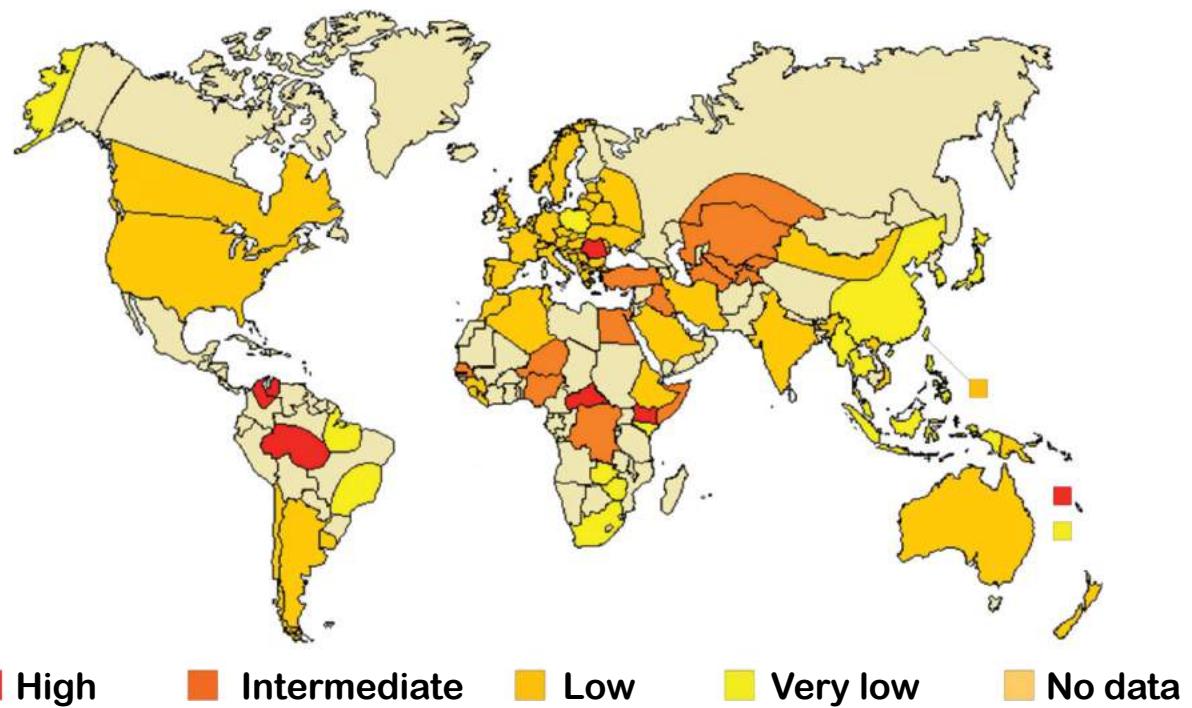
# **Delta Viral Hepatitis:**

## **A Worldwide Healthcare Problem?**

- **2 Billion individuals have been infected with HBV**
  - Among them : 240 millions chronically infected
  - Risk of developing cirrhosis and HCC X 100
  - 1 million deaths per year
- **≈10 to 20 millions chronic carriers of HDV**
- **In Europe → 4 to 10% of HBV positive patients**

# HDV worldwide epidemiology

Rizzetto M., 2015



# HDV in Europe

Rizzetto M., 2015

- HDV endemic in the general population
- HDV in drug addicts and immigrants

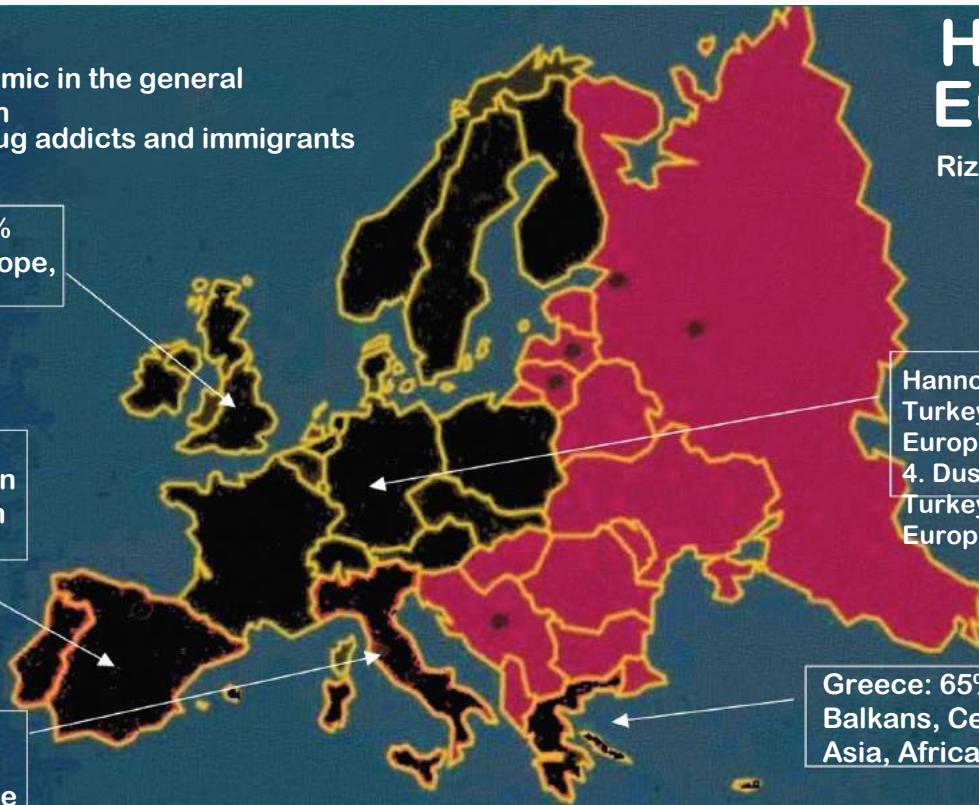
London: 85%  
Eastern Europe,  
Asia, Africa

Spain: 28%  
Africa, Eastern  
Europe, South  
America

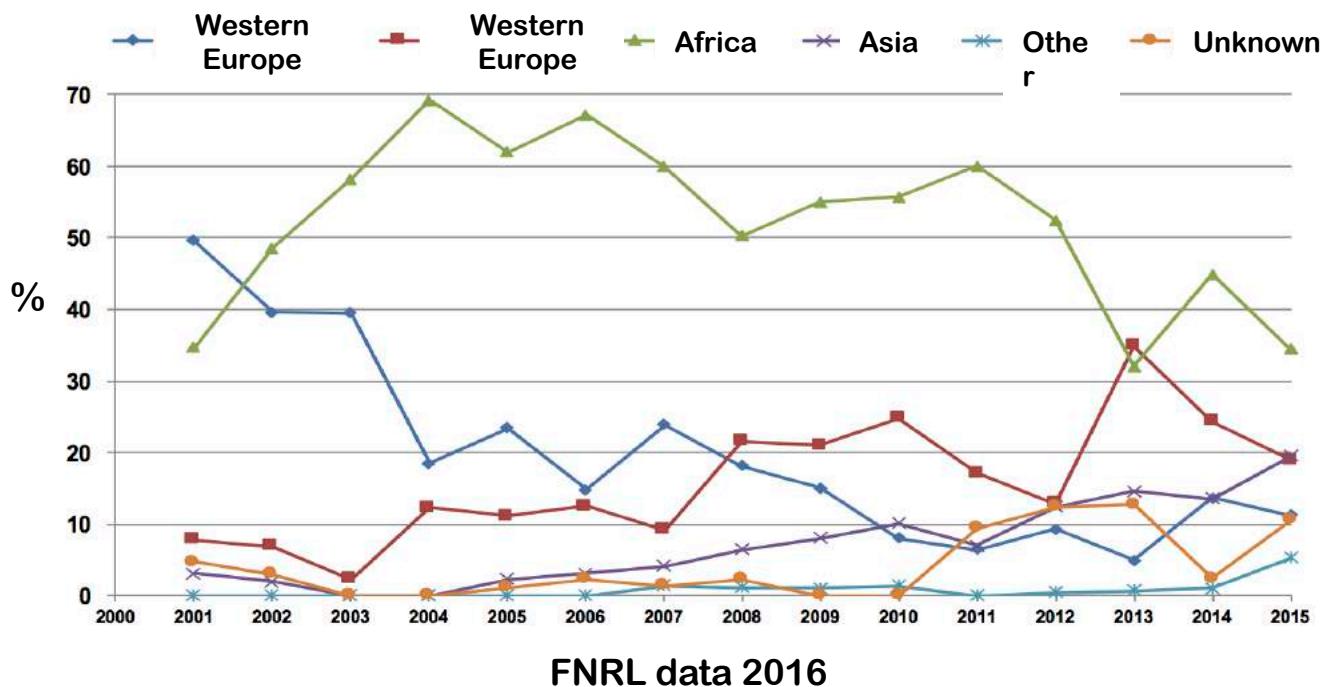
Italy: 40%  
Romania,  
Eastern Europe

Hannover: 80%  
Turkey, Eastern  
Europe  
4. Dusseldorf: 56%  
Turkey, Eastern  
Europe

Greece: 65%  
Balkans, Central  
Asia, Africa



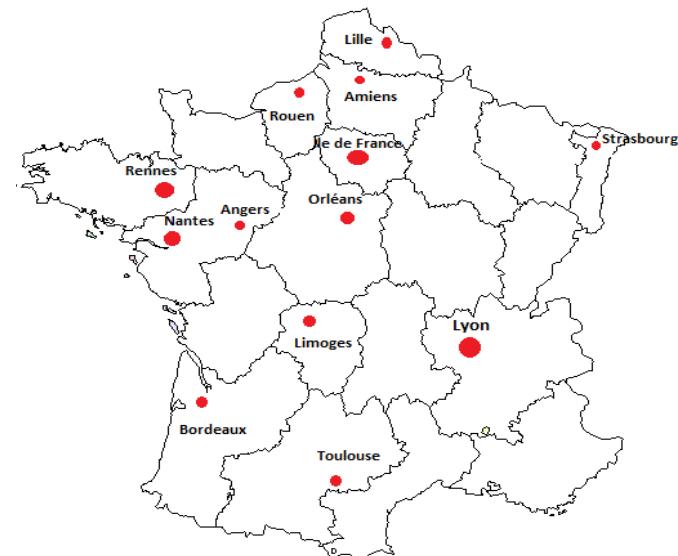
# HDV Epidemiology in France



# Clinical aspects

# The Deltavir study

EASL 2015



35 Centers



Hepatology Unit  
Dominique Roulot

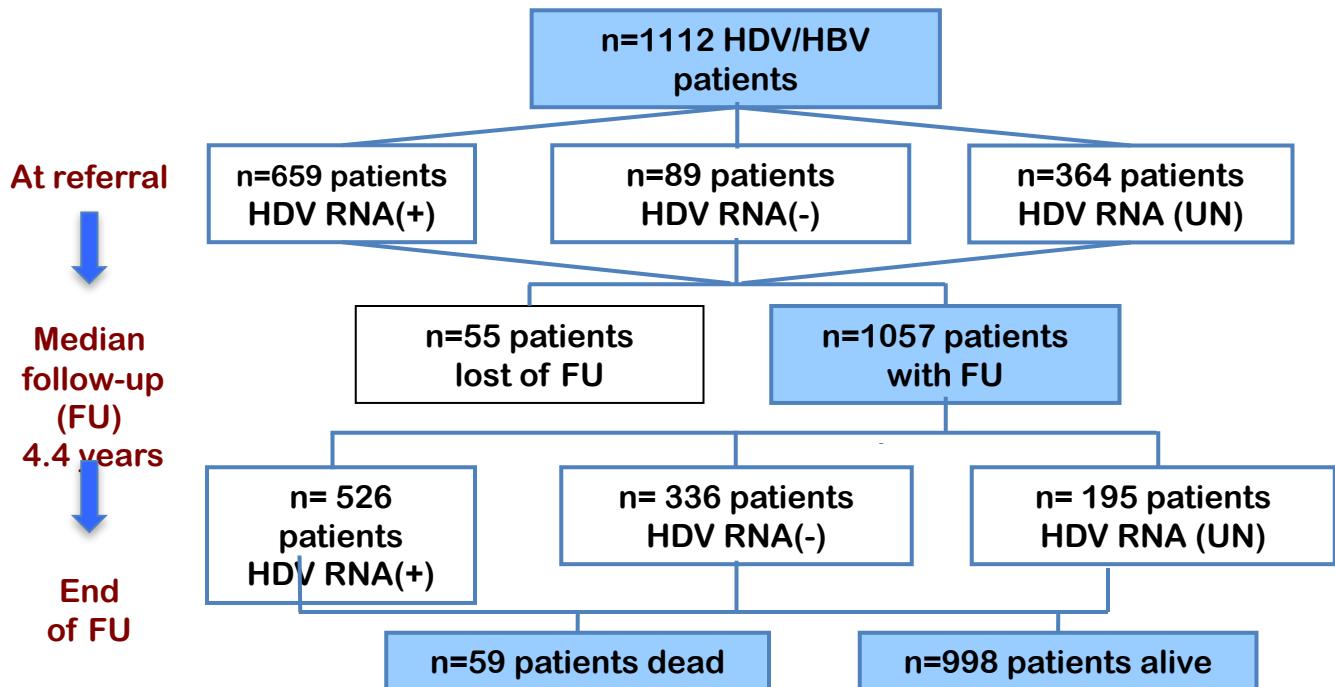
FNRL for HDV  
Emmanuel Gordien  
Ségolène Brichler  
Frédéric Le Gal

Biostatistics  
Françoise Roudot-Thoraval

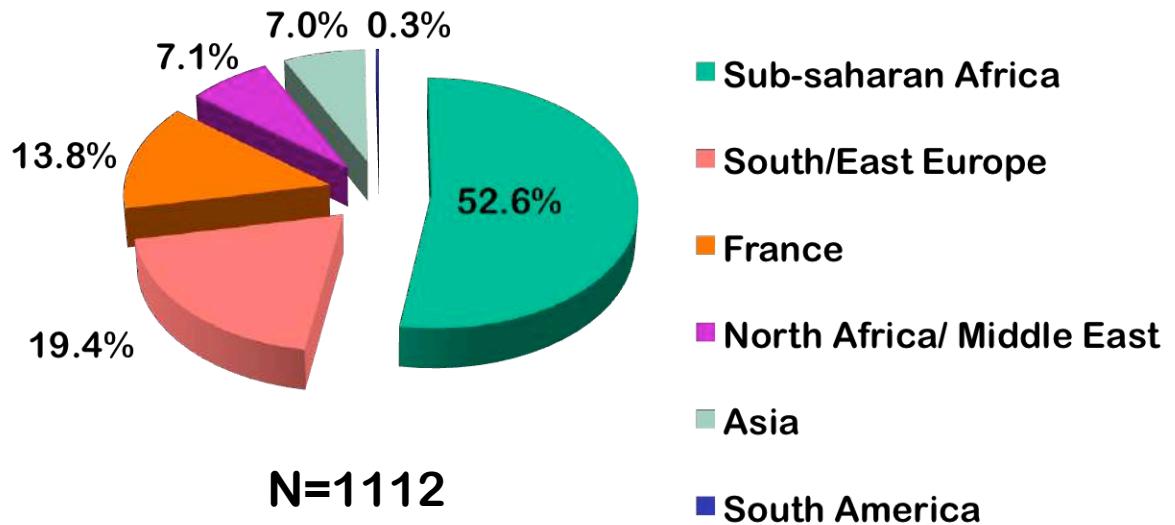


Unité de Virologie Avicenne  
Virus de l'Hépatite Delta  
Laboratoire associé au  
CNR des Hépatites B, C et Delta

# The Deltavir study



# Geographic origin of the patients



## Evolution and severity of the liver disease

Median of follow-up (FU): 4.4 years [0.8 - 8,9]

Clinical Status	At referral	At end of FU
Cirrhosis	28.3%	48.8%
Liver Decompensation	14.8%	24.2%
HCC	2.7%	9.2%
Death or Liver Transplantation	-	19.1%

At the end of follow-up:

- 584 were treated with IFN or  $\alpha$ PegIFN
- 33% of whom being HDV-RNA negative

# Liver events: incidence at 10 years

Event	Cirrhosis	Hepatic decompensation	HCC	Death or Liver Transplantation
Incidence at 10 yrs [95% IC]	57.3 % [53.2 - 61.4]	31.0 % [27.3 - 35.2]	15.3 % [12.1 - 19.3]	25.1 % [21.6 - 28.9]

# **HDV infection**

- HDV infection usually results in an inhibition of its helper HDV and by a much more severe liver disease
- ... and must be systematically screened in all HBV-infected patients

# Diagnosis

# HDV infection diagnosis

- Total HDV Abs : key marker
- IgM HDV Abs
  - Persist in chronic infection +++
  - But can lack in African patients \*
- Delta Ag
  - 2524 positive = 0.28% (FNRC)
  - Between 1996 et 2004 : 7 /
- Delta ARN +++
  - Qualitative RT-PCR ( $\approx$  60 IU/mL)\*\*
  - Quantitative real-time RT-PCR +++ (2 to 8 log IU/mL) \*\*\*

\* Lunel F, Mansour W et al., J Infect. 2013

\*\* Radjef N. et al., J. Virol. 2004

\*\*\* Legal F. et al., J. Clin. Microbiol. 2005

# HDV Diagnosis Algorithm (1)

1 Marker  
**Total HDV Abs**

ELISA assays :

Diasorin<sup>\*</sup>; EIAGen (Adaltis);  
Dia.Pro (Ingen, BioEvolution)



Neg



Neg

Plasma → False positivity +++

# HDV Diagnosis Algorithm (2)

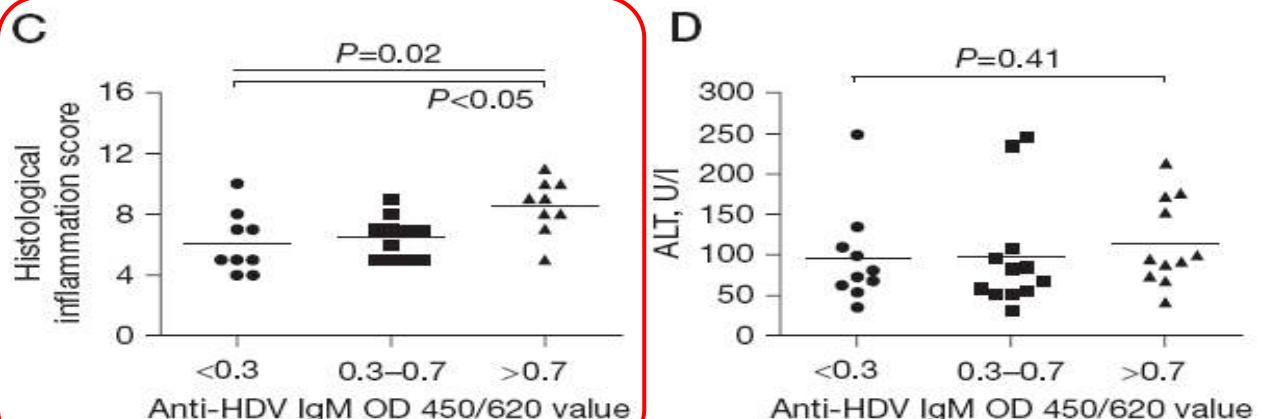
Total HDV Abs : Pos



IgM Abs (ELISA) ?

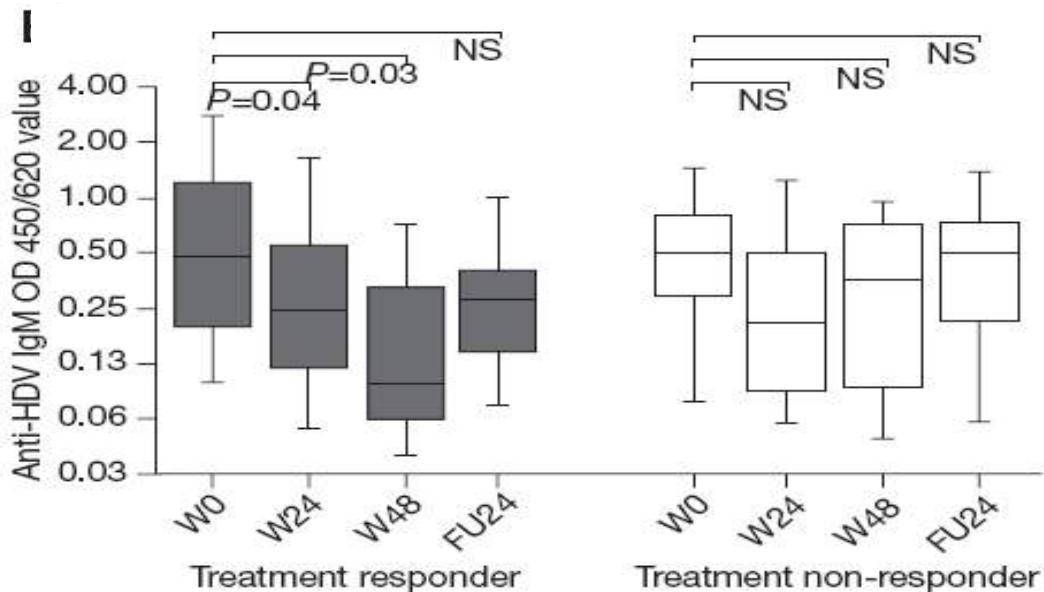
# Interest of HDV IgM Ab(1)

(Wedmeyer H., 2011; Mederacke I. 2012)



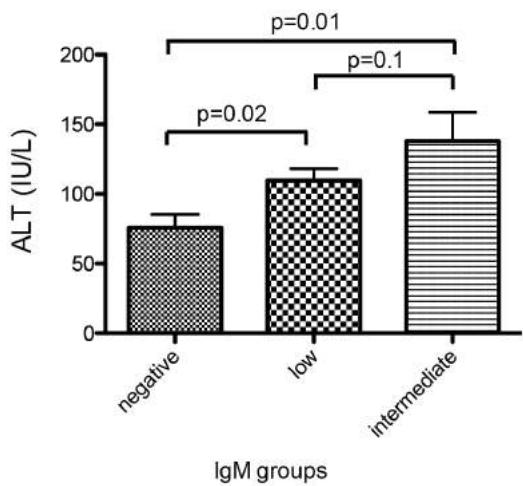
# Interest of HDV IgM Abs (2)

(Wedmeyer H., 2011; Mederacke I. 2012)

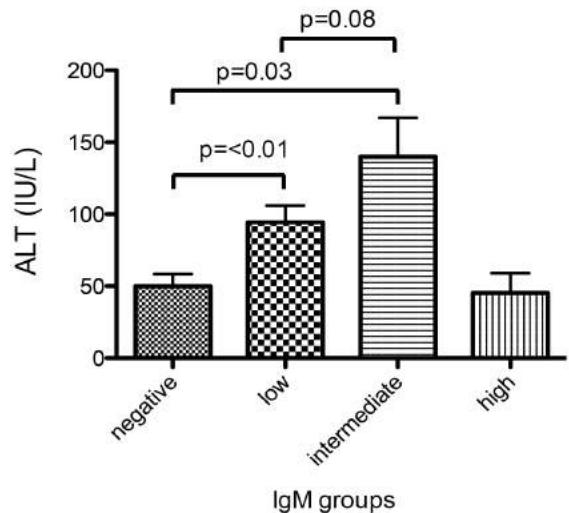


# Interest of HDV IgM Abs (3)

(Wranke A., 2014)



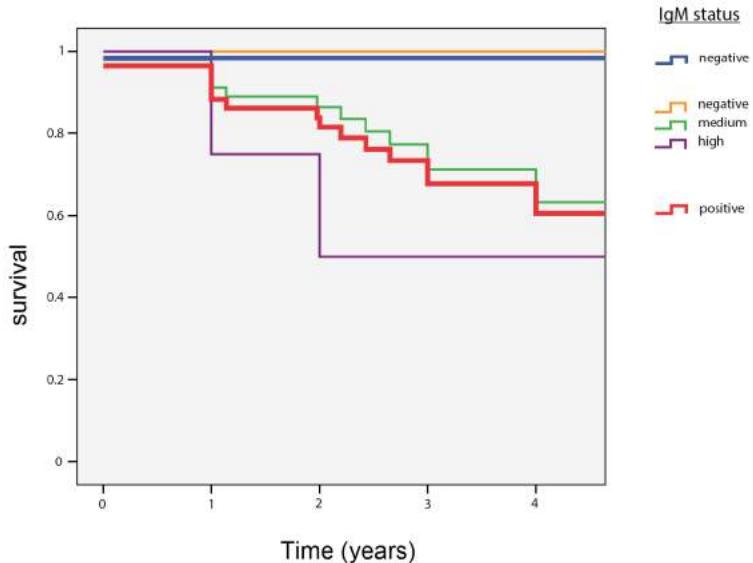
HIDIT-2 Cohort



MHH Cohort

# Interest of HDV IgM Abs (4)

Cumulative event free survival



Number at risk

IgM negative	11	8	6	5	3	2
IgM positive	67	48	37	27	19	13

(Wranke A., 2014)

# IgM Abs Assays

## French national quality control (2012)

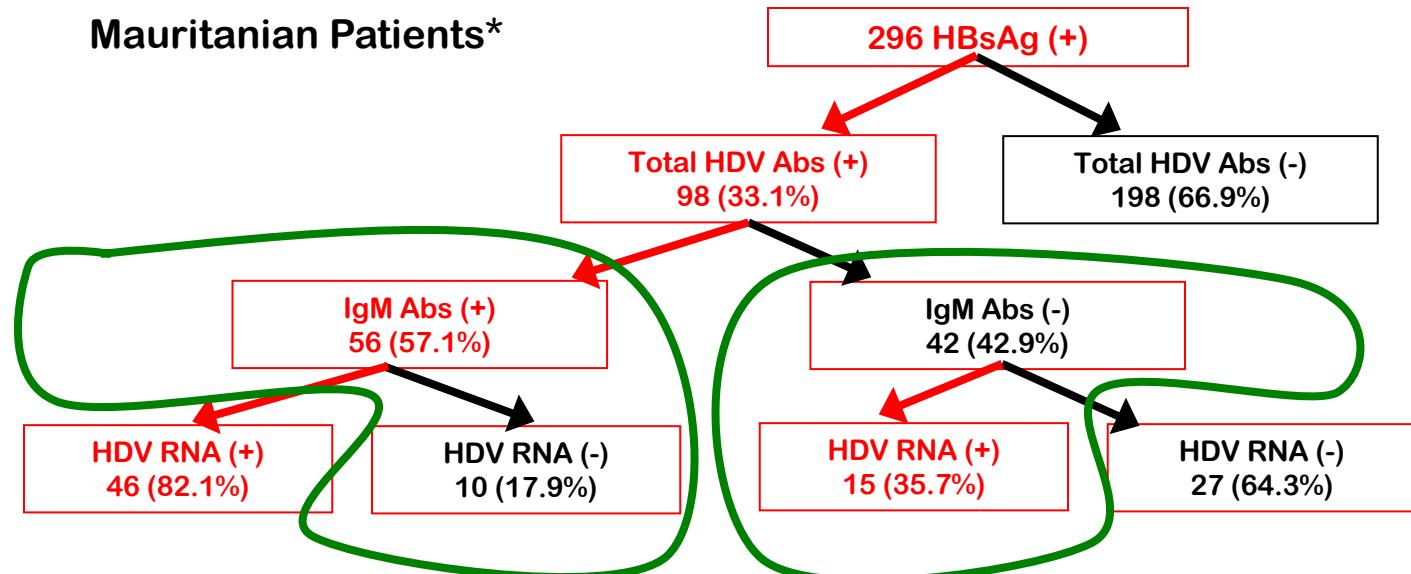
- IgM anti-HDV Abs  
(14 Labs using Diasorin kit®)

Samples (n=4) Expected Results	S3583 w POS	S3850 POS	S4203 w POS	S2012 NEG
Results				
Pos	5	14	8	
D	2		1	
Neg	7		5	14
Concordance	35.7%	100%	57.1%	100%

Brichler S et al., J. Clin. Mic. 2014

# HDV IgM Abs in African patients

Mauritanian Patients\*



\*Lunel F, Mansour W et al., J Infect. 2013 Jun

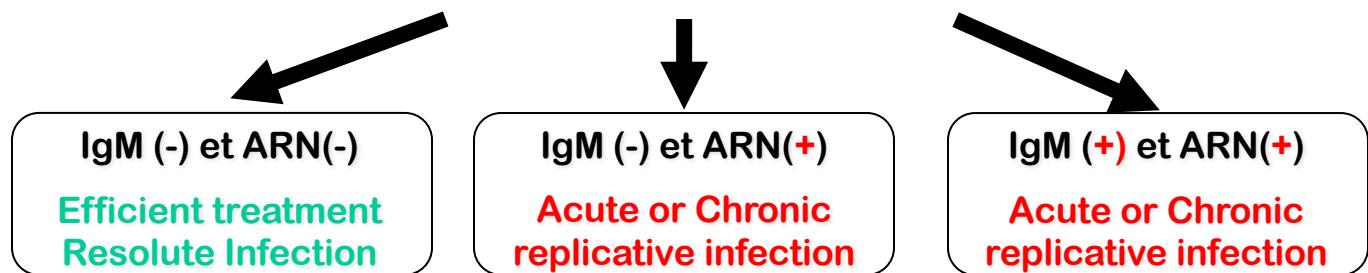
# HDV Diagnosis Algorithm (3)

Total HDV Abs (IgG) : Pos

HDV IgM Ab ?

HDV RNA +++

RT-PCR Quantitative+++ (Qualitative)



# HDV Diagnosis Algorithm (4)

Total HDV Abs (IgG) : Pos

HDV IgM Ab ?

HDV RNA +++

RT-PCR Quantitative+++ (Qualitative)



IgM (-) et ARN(-)

Efficient treatment  
Resolute Infection



IgM (-/+ et ARN(+)

Acute or Chronic  
replicative infection

# Major clinical interests of HDV Viral load quantification

- Identification of patients with a replicative HDV infection : viral replication is associated with a poor outcome of the hepatic disease
- Decision to treat
- Evaluation of treatment efficiency and virological response under treatment
- Decision to stop the treatment
- Evaluation of new anti-HDV compounds

# **HDV genetic variability**

**& DETECTION /**

## **QUANTIFICATION of HDV**

### **RNA Viral Load**

# HDV Genetic Diversity

Nadjia RADJEF : D (2001), (P. DÉNY et E. GORDIEN)

Mathieu TAMBY : M1 (2001) (E. GORDIEN)

Frédéric LE GAL : D (2007) (P. DÉNY)

From 3 to ... 8 genotypes !

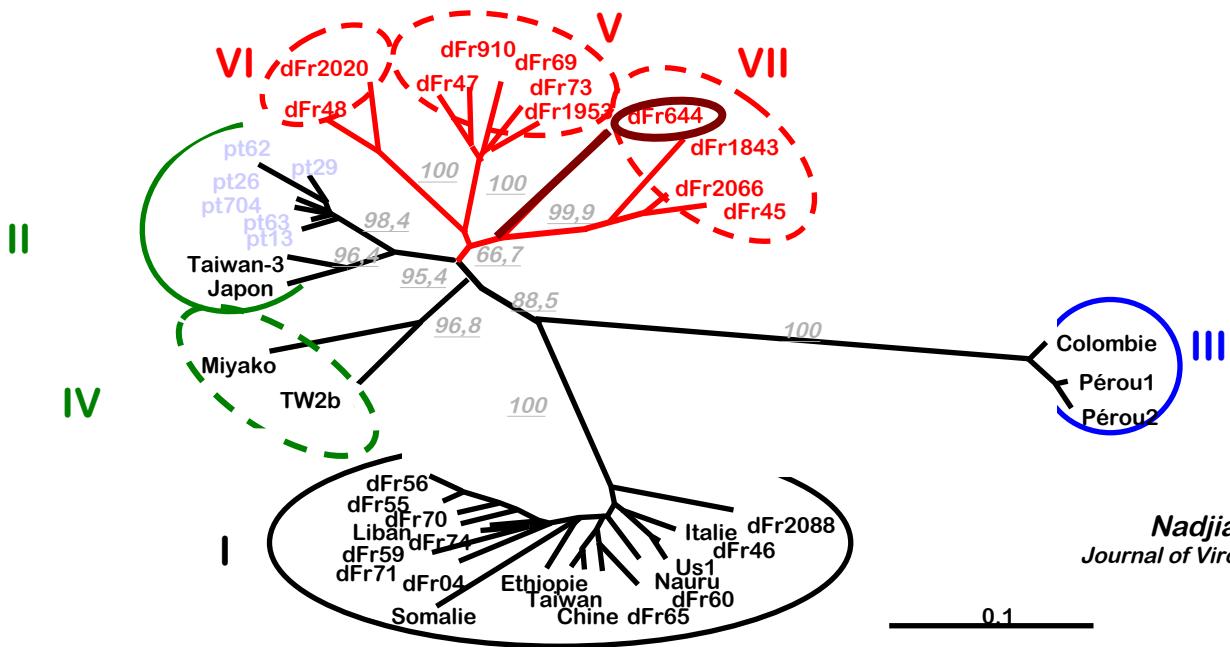
*Radjef N. et al, Journal of Virology 2004*

*Le Gal F. et al, Emerging Infectious Diseases 2006*

*Dény P., Curr Top Microbiol Immunol. 2006*

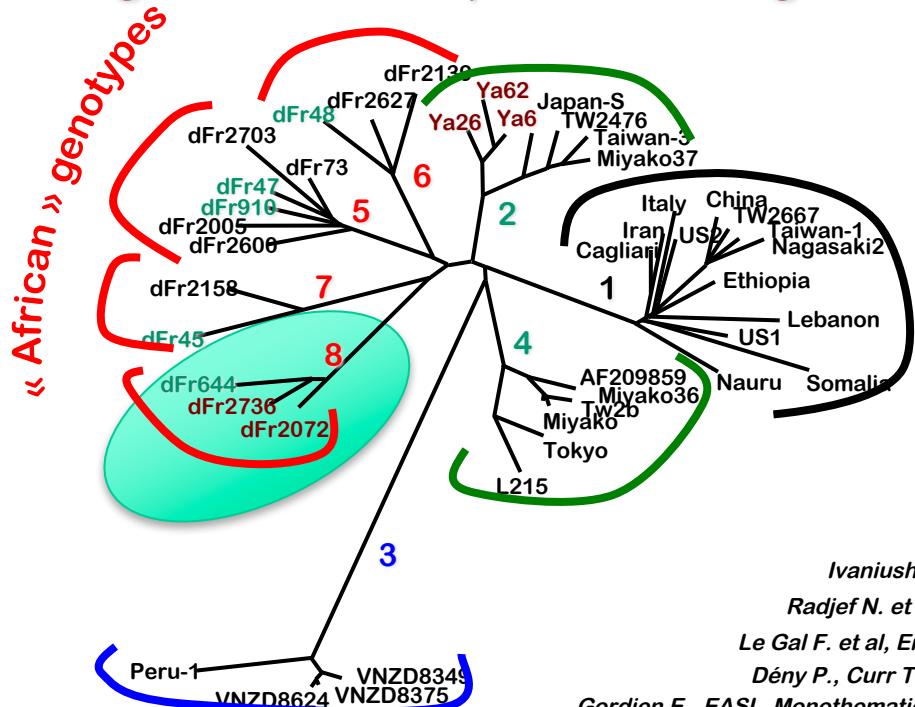
*Gordien E, EASL monothematic conference (2010) and manuscript submitted 2013*

# HDV Genotypes



Nadjia Radjef,  
Journal of Virology 2004

# HDV genus is composed of 8 genotypes



Ivaniushina et al., J Gen Virol, 2001

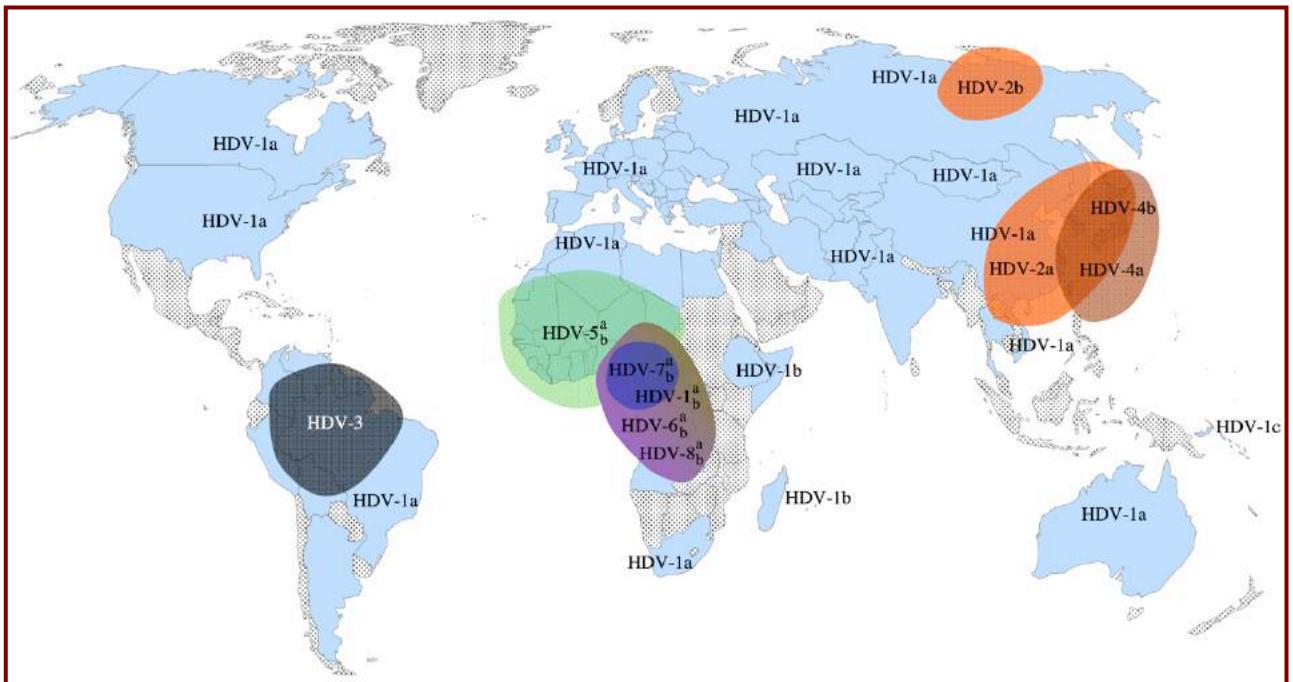
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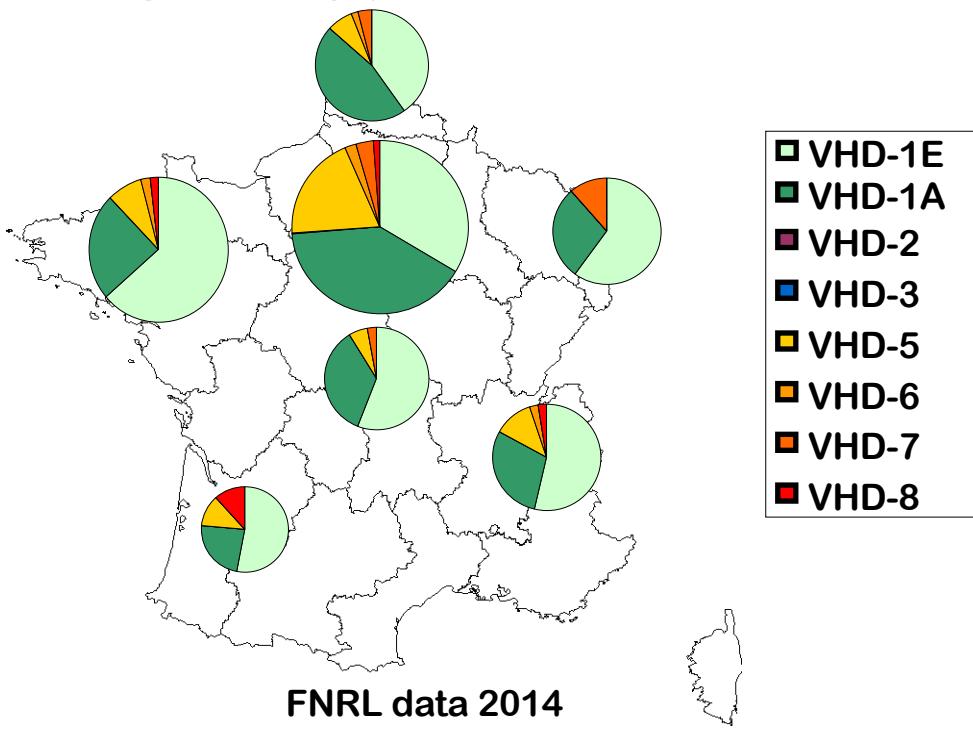
Dény P., Curr Top Microbiol Immunol. 2006

Gordien E., EASL Monothematic conference, Istanbul 2010

# HDV (sub)genotypes



# HDV genotypes in France



# Molecular tools for HDV ARN VL Quantification

# « In house» assays

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# Commercial assays

- Roche® Lightmix HDV kit (Germany)
- AJ-Roboscreen® (Germany)
- DiaPro® HV-RNA Quantification kit (Italy)
- Lipsgene□ HDV Kit (Germany)
- HDV Real-TM Quant Sacace® (Italy)
- Liferiver™ HDV-Real Time RT-PCR Kit (China)
- Amplisens® HDV-Monitor-FRT PCR Kit (Slovakia)
- Fast Track Diagnostics™ (Luxemburg)
- Primerdesign™ LtD United Kingdom)
- Ecoli ® (Russia)
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# Performances of these assays



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Volume 11, Issue 6 , Pages 734-740, June 2013

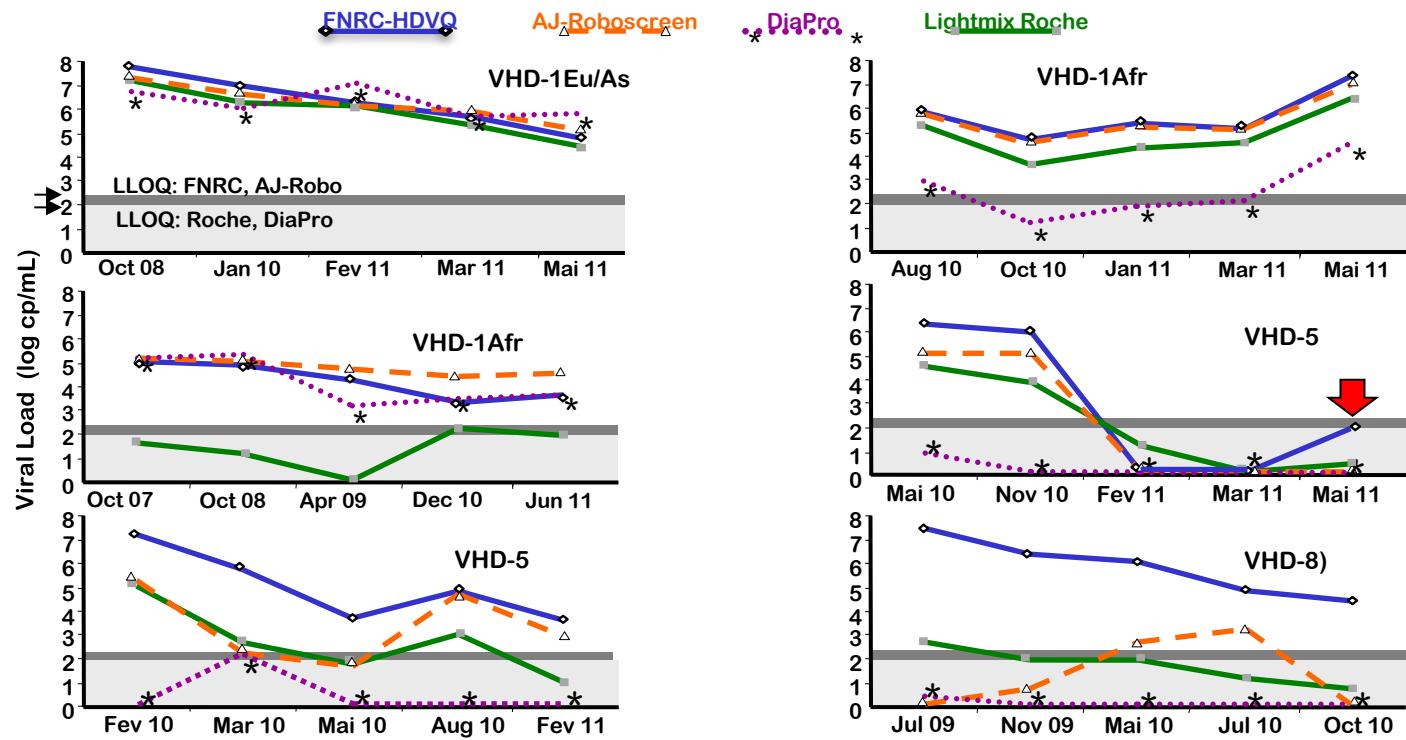
Next »

## Commercial Real-Time Reverse Transcriptase PCR Assays Can Underestimate or Fail to Quantify Hepatitis Delta Virus Viremia

Sérgolène Brichler, Frédéric Le Gal, Afifaa Butt, Sylvie Chevret, Emmanuel Gordien✉

published online 04 February 2013.

# Longitudinal Study of 6 Patients





Avicenne  
Hospital,  
Bobigny France



# 1<sup>st</sup> International quality Control for HDV RNA Viral Load Quantification



Agence autonome de l'Inserm

# 28

## Participant Laboratories

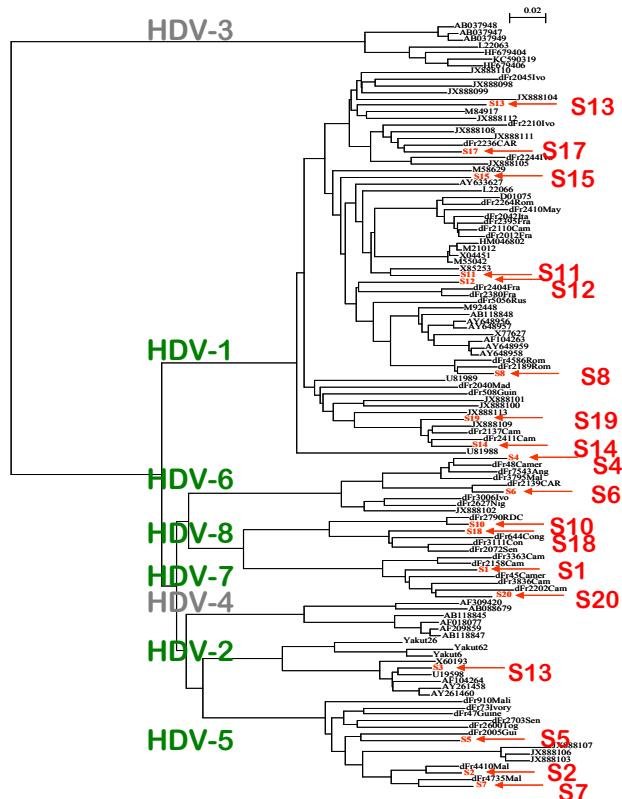
CONTACTS	INSTITUTION / ADDRESSES	PAYS
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Dr Emmanuel Gordien	CNR associé Delta	France
Pr Marianne Coste-Burel	Laboratoire de virologie CHU de Nantes	France
Pr Patrice Hervé / Dr Scholtès Caroline	Laboratoire de virologie Centre de biologie Nord, CHU Lyon Sud	France
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Dr Michael Chudy	Molekulare Virologie / Molecular Virology / Paul-Ehrlich-Institut	Germany
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Dr Jeremy Garson/ Dr RB Ferns	Clinical Microbiology and Virology UCLH NHS Foundation Trust	United Kingdom
Dr Tonya Mixson-Hayden/ Dr M. Kodani	Associate Service Fellow Division of Viral Hepatitis Assay Development and Reference Laboratory	USA

## 1. HDV-IQC panel

- **20 Samples**  
→ including 2 negative controls
  - **Viral loads:**  
→ 3.5 et 7.5 log (copies/ml)
  - **Genotypes :**
    - HDV-1Afr (N=4)
    - HDV-1Eu/As (N=4)
    - HDV-2 (N=1)
    - HDV-5 (N=3)
    - HDV-6 (N=2)
    - HDV-7 (N=2)
    - HDV-8 (N=2)

## 2. HDV-WHO Standard

- Dilutions: 1:10 et au 1:100 ( $\times$  3)
  - + 2 negative controls



## « In house» assays

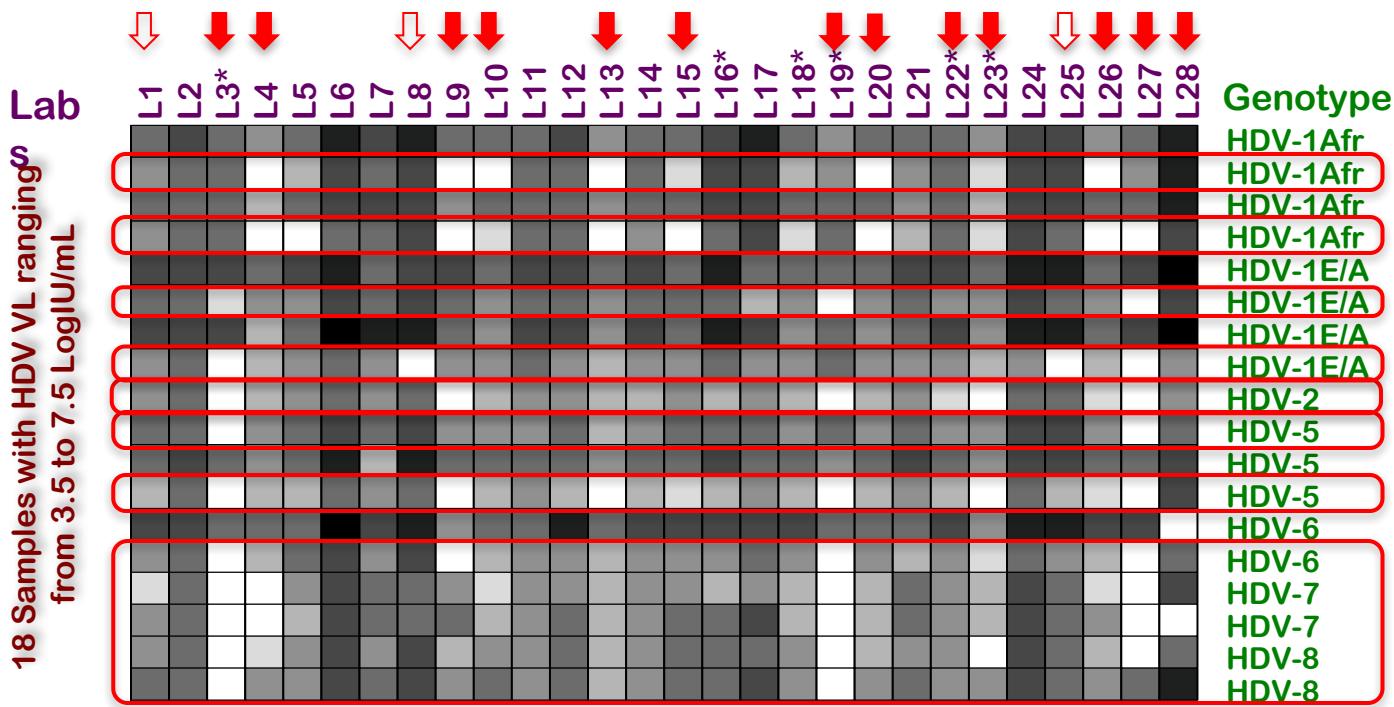
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- Ecoli ® (Russia)
- Bosphore ~~X~~ HDV Quantification-Detection Kit v1 (Turkey)

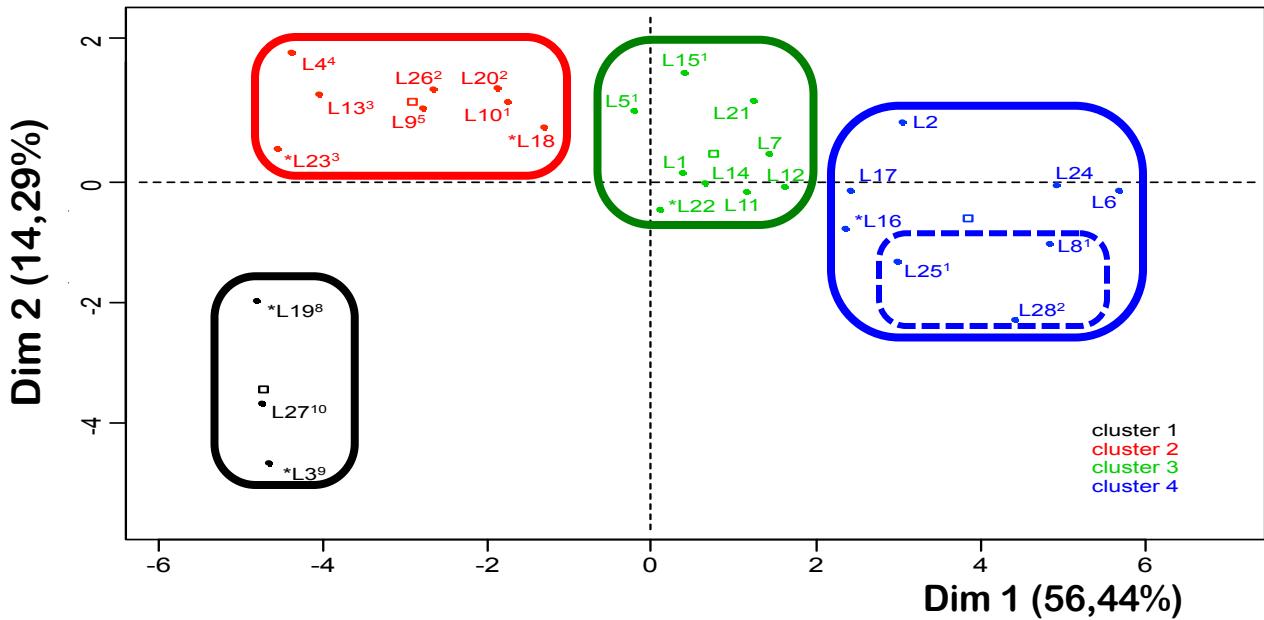
# Results (IU/mL)

# Overall Results



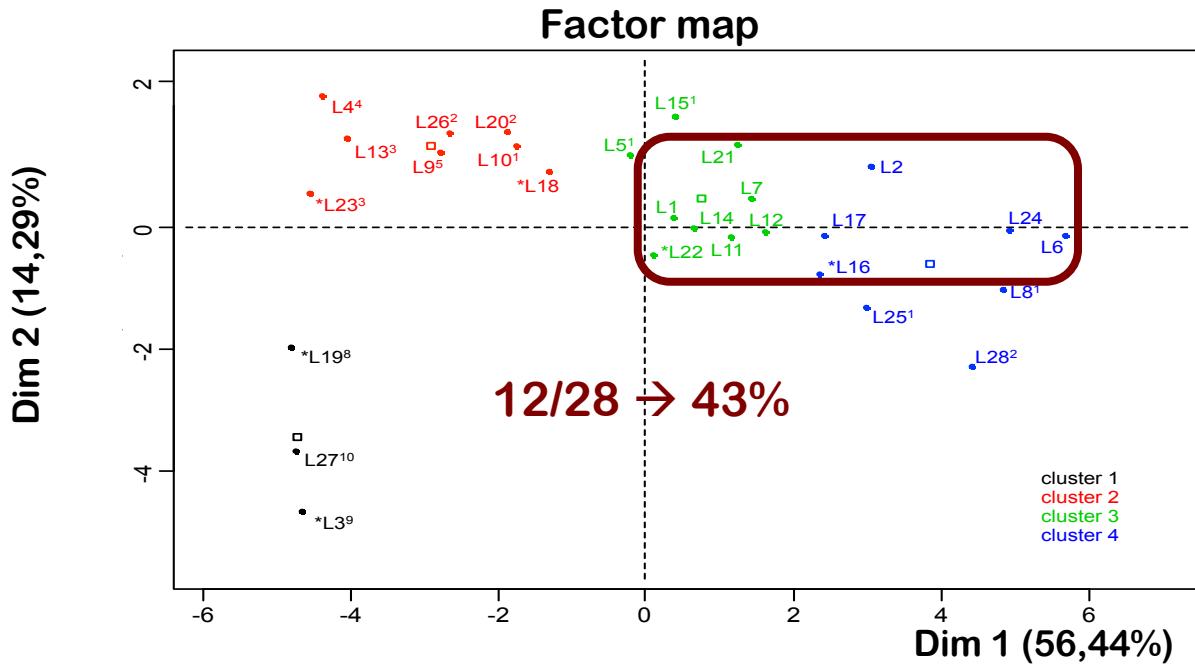
# Labs can be classified into 4 « clusters »

Factor map



F. Le GAL, S. Brichler, R Sahli, S. Chevret and E. Gordien: Hepatology 2016

# Labs can be classified into 4 « clusters »



The first Results of the  
1<sup>st</sup> International Quality Control:  
**Most available assays  
underestimate or Fail to  
quantify HDV RNA VL**

**HDV Variability  
seems to be of  
major  
concern**



# A new kit: the *Eurobioplex HDV Kit*®

(Le Gal F. et al., *J. Clin. Microbiol.*, 2017)

# A new kit: the *Eurobioplex HDV Kit* ®

(Le Gal F. et al., J. Clin. Microbiol., 2017)

Performance comparisons with the FNRL assay results (N = 611)

HDV FNRL assay result	Eurobioplex HDV kit result	
	Positive	Negative
Positive	389	9 <sup>a</sup>
Negative	14 <sup>a</sup>	198

<sup>a</sup>Sample with a very low HDV viral load (<3 log IU/ml).

**Sensitivity: 98.8%**  
**Specificity: 100%**

# A new kit: the *Eurobioplex HDV Kit* ®

(Le Gal F. et al., J. Clin. Microbiol., 2017)

## Performance Comparisons with the FNRL assay results (N = 151)

- 33 HDV-1Afr ; 61 HDV-1Eur/As
- 1 HDV-2, -3, -4\*
- 22 HDV-5 ; 7 HDV-6 ; 10 HDV-7 ; 3 HDV-8
- 12 negative controls

Test type		Median viral load by genotype(s) (log IU/ml)		
		All	HDV-1	HDV-5 to HDV-8
Eurobioplex kit		5.05	5.87	4.74
HDV FNRL		5.16	5.61	5.38
Difference between results		-0.11	+0.26	-0.64

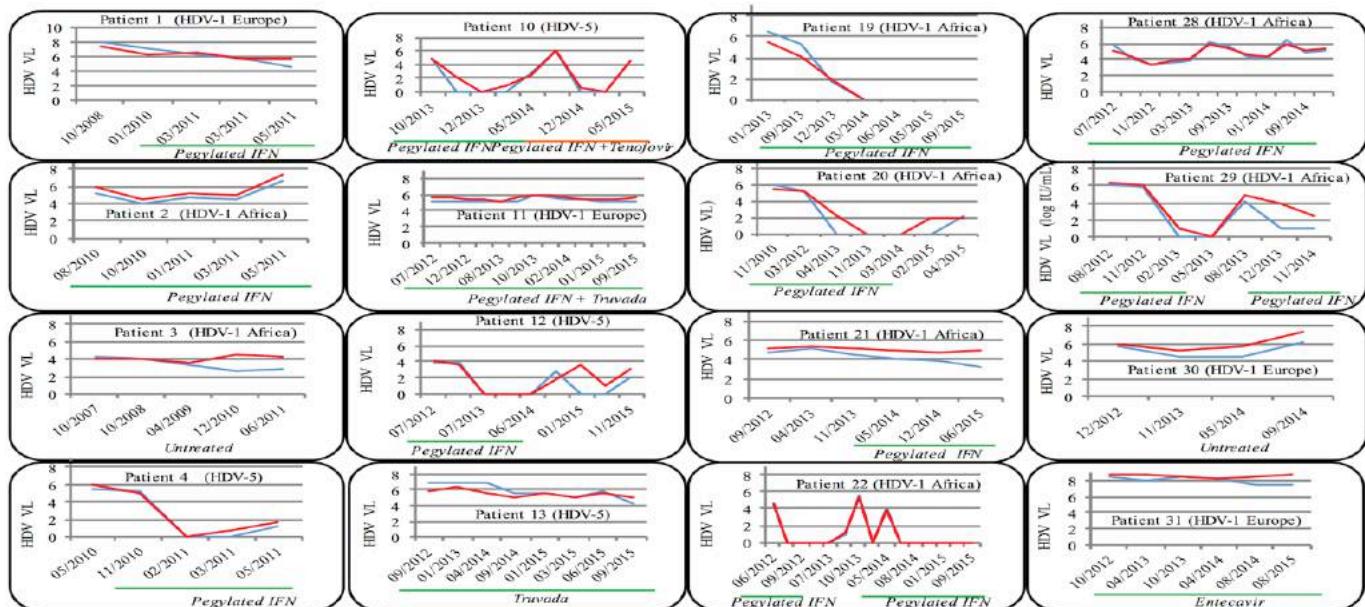
# A new kit : the *Eurobioplex HDV Kit* ®

(Le Gal F. et al., J. Clin. Microbiol., 2017)

FNRC

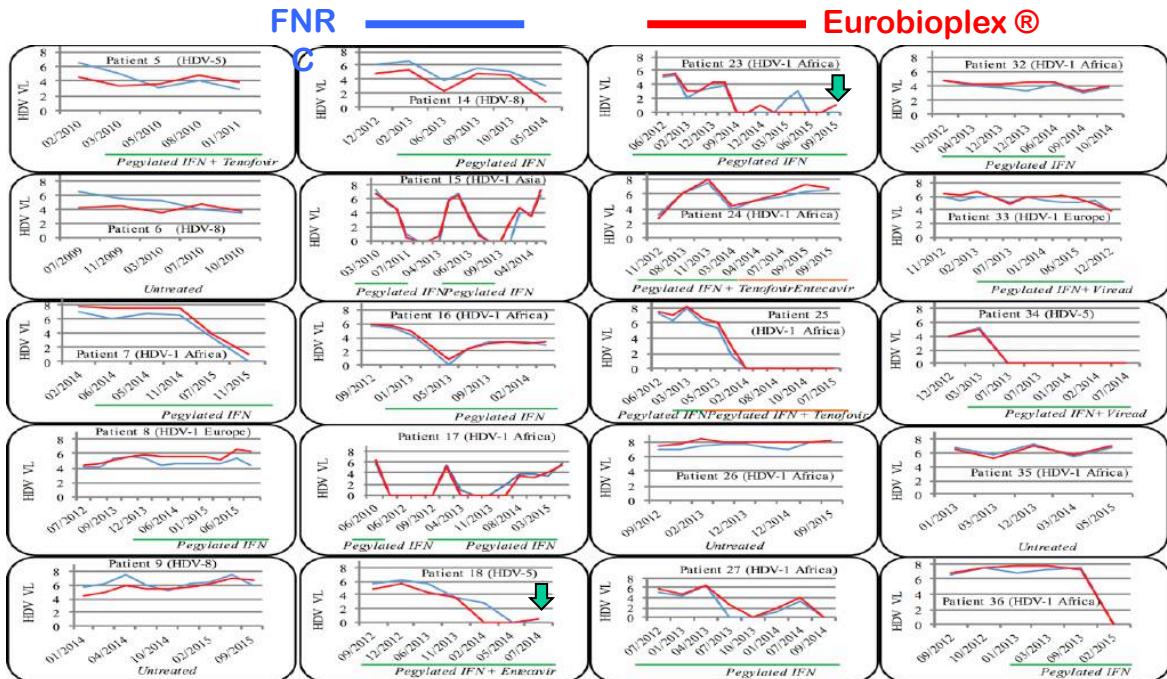
Eurobioplex ®

Performance Comparisons with the FNRL assay results (N=36)



# A new kit : the *Eurobioplex HDV Kit*®

(Le Gal F. et al., J. Clin. Microbiol., 2017)



# Summary

- Eurobioplex HDV® kit was very satisfactory on this large panel of samples with good repeatability, specificity and sensitivity, both in serum and plasma samples.
- All samples of all genotypes were well detected and quantified in comparison to the FNRC assay.
- The kit is easy to use and is a suitable tool for monitoring HDV-infected patients.

# Conclusions

- HDV is an unique and amazing virus still understudied
- Is responsible for a much more serious liver disease
- **Its diagnosis must be systematic in all HBV positive, and patients and relies mainly upon:**
  - HDV total Abs
  - Quantitative HDV RNA (Qualitative)
- HDVL quantification assays need further development
- Diagnostic algorithms and guidelines for management of patients remain to be better defined
- **Active basic and clinical research is absolutely needed to better understand the fundamental biology of HDV and to provide molecular diagnostic tools and specific treatments**

# Thank you for your attention !



Avicenne Virology Unit  
*French National Reference Laboratory*  
*For Hepatitis Delta virus*  
*Associated to the National Reference Centre*  
*for Hepatitis B, C and Delta*

A large, semi-transparent gray circle is centered on the slide. Inside this circle is a stylized graphic of a grid of squares. The grid is composed of various sizes of gray squares arranged in a roughly rectangular shape. A single orange square is positioned in the center of the grid.

# Discussion