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## **Editorial: similar risk of hepatocellular carcinoma in chronic hepatitis B patients treated with tenofovir or entecavir-new clues from Europe. Authors' reply.**

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3 **Editorial: similar risk of hepatocellular carcinoma in chronic hepatitis B patients treated**  
4 **with Tenofovir or Entecavir - new clues from Europe. Authors' reply**  
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11 In their Editorial Lampertico and Papatheodoridis wisely conclude that the controversy of  
12 whether Tenofovir reduces the risk of hepatocellular carcinoma to a greater extent than  
13 does Entecavir treatment continues, leaving open the possibility that Tenofovir should be  
14 the preferred agent in a subset of patients (1). From our data, we cannot exclude such a  
15 proposition. However, in our comprehensive investigation, an analysis of the effect in  
16 numerous subgroups (including in cirrhotic, non-cirrhotic, experienced or naïve patients,  
17 compensated cirrhotics or cirrhotics with prior complications including HCC or non-  
18 carcinoma complications) did not show evidence of any significant difference between these  
19 antiviral therapies. (2). We believe that the recently published systematic review and meta-  
20 analysis, including 119,053 patients, adds credible supplementary confirmation of the  
21 absence of any major clinically significant difference between these two antiviral drugs: the  
22 8 studies matched by propensity score report a 5-year cumulative incidence of  
23 hepatocellular carcinoma of 3.44% for Entecavir and 3.39% for Tenofovir. In their analysis  
24 the authors suggest that “treatment should be guided by patient tolerability and  
25 affordability rather than whether one drug is more effective than the other” and we  
26 completely agree with this conclusion.  
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26 The author' declarations of personal and financial interests are unchanged from those in the  
27 original article (2).  
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