Meeting Report

A Unique Opportunity for an Intercultural Discussion on CAM and Liver Disease

APASL, Asian Pacific Association for the Study of the Liver, December 2004, New Delhi, India

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The meeting of the APASL, Asian Pacific Association for the Study of the Liver, was held in December 2004, in New Delhi, India. The meeting was held under the patronage of the APASL Committee and Board of Presidents of the National Liver Association and in conjunction with the annual conference of the Indian Association for the Study of Liver (INASL). The congress was designed to have a core meeting with three parallel sessions running throughout, dedicated research workshops and intensive breakfast sessions. This report concentrates on the two sessions devoted to complementary and alternative medicine (CAM) and shows the latest research in CAM for liver disease and the concerns of doctors about integrating CAM with more traditional treatments. With researchers and practitioners gathering from all over the world, it was a unique opportunity for an intercultural discussion on CAM and liver disease.

Keywords: APASL – Liver disease – India

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The breakfast sessions on December 13th were three clinically oriented meetings, one discussing the benefits, limitations and drawbacks of concomitant drug therapy for liver disease, another examining the non-hepatotropic viruses that cause hepatitis and their pleiomorphic manifestations, and the third on the extra-hepatic manifestations of hepatitis B and C. The most relevant session was undoubtedly ‘Herbal and Complementary Medicines in Liver Diseases’, chaired by Professors Wang (China) and Habibullah (India). After a very clear overview on the topic from Professor Okita, Professor Marotta (Italy) made a brief state-of-the-art presentation on the specific issue of phyotherapeutic compounds in chronic liver disease and, particularly, in hepatitis C virus (HCV)-related liver disease, highlighting the wealth of good basic scientific data on several compounds but the lack of solid and well-designed clinical data for most of them. In particular, the erratic pharmacokinetics of sylimarine is one of the reasons for the growing lack of confidence in most clinicians embarking upon such studies of this compound, while the rare but severe side effects of TJ-compounds pose a threat to their future wide application in clinics of Western countries. On the contrary, although so far limited by its intravenous administration route, quality-controlled glycyrrhizin acid-based compounds (SNMCs) are backed up by a considerable amount of in vitro, in vivo and clinical data.

Given the worthwhile Japanese data (mostly from Professor Tarao), proving that a hyper-transaminasemic state is a predictor of higher HCC transformation during the year, such compounds may represent a unique therapeutic weapon in patients with established liver cirrhosis who are not amenable to interferon (IFN) treatments as well as for those who have a poor or...
no response to IFN. He also mentioned the even wider potential application of this compound in other cumbersome clinical conditions such as non-alcoholic steatohepatitis (NASH), especially when considering the ongoing search to obtain an optimal bioavailable oral formulation of SNMC.

Professor Nandini from the Indian Research Council expressed the Council’s utmost interest in the scientific and ethical regulation of the matter and called for a common ground for discussion. He also pointed out the importance of considering the cost of medication. The discussion which followed was very exciting. ‘Expert clinicians such as Professor Ferenci, a pioneer in sylimarine research in Austria, made the disappointing assertion that, given the low costs of natural compounds, firms could hardly devote any funds to such worthwhile and badly needed research.’ Other researchers from India and Western countries emphasized the great need for such complementary compounds to fill the gaps in the present chemical treatments such as side effects and increasing costs. Professor Blum announced an ongoing SNMC study that he is pursuing at his institution. In summary, each of these CAM sessions affirmed a definitive role for validated and quality-controlled phyto-compounds, their potentially unique benefits including the likelihood of better compliance by patients and reduced cost. The mandatory task remains to conduct evidence-based clinical studies that support such expectations.

Professor Wang described the more than 2000 year experience of Traditional Chinese Medicine, pointing out the difficult practical inferences in modern clinical practice. He also presented interesting recent clinical data on *Phyllanthus amarus* and oxymatrine in hepatitis B virus (HBV)-related liver disease and of shisandra and SNMC in HCV-related liver disease. The session was concluded with a comment by Professor Habibullah who introduced an extensive survey that he is conducting on CAM practices for liver disease in India with the aim of regulating such matters while pooling data amenable to multi-center studies.

Another 2hr workshop was dedicated to this challenging CAM topic the next day, chaired by an authoritative Indian opinion leader in hepatology, Professor B. N. Tandon. As the previous day’s speakers had reported their experience and the state of the art in their own countries, Professor Acharya also gave us an update on ongoing research in India. In particular, he mentioned one double-blind study in which IFN was associated with either ribavirin or SNMC and that these preliminary suggestions of equipotency of the two arms are deserving of great attention. Professor Nandini from the Indian Research Council expressed the Council’s utmost interest in the scientific and ethical regulation of the matter and called for a common ground for discussion. He also pointed out the importance of considering the cost of medication. The discussion which followed was very exciting. ‘Expert clinicians such as Professor Ferenci, a pioneer in sylimarine research in Austria, made the disappointing assertion that, given the low costs of natural compounds, firms could hardly devote any funds to such worthwhile and badly needed research.’ Other researchers from India and Western countries emphasized the great need for such complementary compounds to fill the gaps in the present chemical treatments such as side effects and increasing costs. Professor Blum announced an ongoing SNMC study that he is pursuing at his institution. In summary, each of these CAM sessions affirmed a definitive role for validated and quality-controlled phyto-compounds, their potentially unique benefits including the likelihood of better compliance by patients and reduced cost. The mandatory task remains to conduct evidence-based clinical studies that support such expectations.