HIV-positive liver cancer patients have a higher drop-out rate from transplant lists.

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Hepatitis B (HBV) and hepatitis C (HCV) are both viral diseases that cause inflammation of the liver. Of the 40 million HIV patients in the world, approximately 6-9 million are also carriers of one of the chronic hepatitis viruses. Since the development of highly active antiretroviral therapy (HAART), the life expectancy of HIV-positive patients has significantly increased. For this reason, however, liver disease has become the primary cause of death among patients co-infected with both HIV and HCV or HBV. Of these cases, 25% die from the liver cancer hepatocellular carcinoma (HCC). Liver transplants are the most common forms of treatment for HCC, but a recent study in the journal *Hepatology* shows that HIV patients have a significantly higher drop-out rate from liver transplant waiting lists. Approximately 23% of HIV patients remove themselves from waiting lists, whereas other patients have a dropout rate of 10%. This factor may have to do with HIV patients generally having a higher level of alpha-fetoprotein (AFP), which indicates a poorer prognosis, even with a transplant.

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