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MOLECULAR DIAGNOSTICS OF HBV AND HCV INFECTIONS IN CLINICAL PRACTICE

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Molecular techniques have become regular in clinical practice, becoming the basic tool in diagnosing infections, analyzing their natural histories, as well as it is a significant marker in choosing therapeutical procedures.

In case of HBV and HCV infections they are a priority, diminishing the role of morphological examinations of the liver, so far considered to be "the golden standard" of diagnosing these diseases.

Results of the RNA quantitative examinations and genotypes in HCV infected are the basis for length of therapy. They are routinely performed during the period of treatment to predict its efficiency (RVR, cEVR, pEVR, EOT), and also to evaluate sustained viral response (SVR).

Correlation was shown between HBV-DNA viral load and dynamics of clinical progression of infection, hence this examination is in this case an important factor qualifying for treatment. Therapeutical decision is taken, in principle, in the context of biochemical and morphological results of examinations of the liver.

Decrease of viremia below the level of detection is the proof of successful treatment. The appearance of HBV-DNA in patients successfully treated earlier precedes other markers in the loss of therapeutical control. This phenomenon is most often marker of drug resistance, connected with the dominance of HBV mutant. Rapid switch into successful treatment protects from relapse. As a result, only routine, systematic viraemia monitoring in course of therapy and analysis of mutating HBV appearance optimizes therapeutical procedures.

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DIAGNOSTYKA MOLEKULARNA ZAKAŻEŃ HBV I HCV W PRAKTYCE KLINICZNEJ

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