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Early View

Correspondence

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Cancer risk in severe alpha-1-antitrypsin deficiency - the importance of the early identification

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We are thankful for the shown interest and important input from doctors Fromme and Strnad.[1] That the individuals suffering from severe alpha-1-antitrypsin deficiency (AATD) have an increased risk of developing liver diseases including hepatic cancer is previously known.[2-3] Our main aim in the recently published article[4] was, in addition to investigate the risk for hepatic cancer, to evaluate the risk for developing other types of cancers (non-hepatic cancers). We are grateful for the up-to-date summary on the knowledge of hepatocellular carcinoma provided by Fromme and Strnad. We strongly agree on the need for a regular surveillance in individuals with severe AATD regarding development of hepatocellular cancer. In Sweden, the individuals with severe AATD are regularly (every two years) followed-up with liver enzymes, but not with elastography or ultrasound of the liver.[5] Our research group has recently recommended this surveillance to the Swedish physicians in our newly updated national guidelines regarding the follow-up of adult Swedish AATD patients. The results from our previously published article on the liver diseases in the Swedish individuals with severe AATD underlie this recommendation.[6] Existing guidelines suggest regular clinical follow-up in individuals with severe AATD with simple liver function tests and liver ultrasound examination, and vaccination against hepatitis in those with hepatitis coinfection.[7] In AATD individuals with cirrhosis, the guidelines suggest screening for primary liver cancer by computer tomography scan, and that these individuals should be advised to abstain from alcohol intake.[7]

We have also shown in a newly published article that screening for AATD at an early age may improve the prognosis of individuals identified to have AATD.[8] Considering the fact that our findings now also show that the individuals with severe AATD may have an increased risk of developing cancer - and not only hepatic cancer - we again would like to highlight the importance of the early identification, and adequate and regular follow-up of individuals with AATD.

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