

## Media Release

--for immediate release--

**Thursday, 28 May 2026 (Barcelona, Spain), EASL Congress 2026, hosted in Barcelona and online on 27-30 May, is showcasing a series of studies with the potential to reshape liver disease prevention, diagnosis, and care.**

Amongst the most significant findings, the APACHE trial demonstrated that plasma exchange with 5% albumin significantly improved 90-day survival in patients with acute-on-chronic liver failure, offering a promising new liver support therapy. Meanwhile, the B-Well Phase 3 trials showed that bepirovirsen achieved clinically meaningful rates of functional cure in chronic hepatitis B, marking a major advance towards finite treatment strategies for a disease that has long required lifelong management.

New data also advanced the treatment of cholestatic liver disease and liver cancer. The EPICS III trial found that Saroglitazar demonstrated strong efficacy as a second-line treatment for primary biliary cholangitis, improving biochemical response and reducing itch severity in patients inadequately controlled on first-line therapy. In liver cancer, the STEREO trial established that high-precision stereotactic body radiotherapy is as effective and safe as radiofrequency ablation for small liver tumours, providing a non-invasive alternative for difficult-to-treat cases.

Rounding out the programme, the pan-European LiverScreen study shed light on a persistent gap in liver disease detection, revealing that alcohol-related and metabolic alcohol-related liver disease often go undetected despite signs of advanced liver scarring. This finding underscores the need for earlier diagnosis and more systematic screening.

*“These studies show the speed at which liver research is moving from scientific promise to clinical impact,”* said **Prof. Debbie Shawcross**, EASL Secretary General. *“Across viral hepatitis, liver cancer, cholestatic disease, alcohol-related liver disease, and liver failure, the data presented at EASL Congress 2026 underline the importance of earlier intervention and more personalised care,”* added **Prof. Ana Lleo**, EASL Vice-Secretary.

---

### Improving survival in acute-on-chronic liver failure: APACHE trial

Patients with decompensated cirrhosis who develop acute-on-chronic liver failure (ACLF) are at high risk to quickly die unless they receive a liver transplant. Given the shortage of organ donors, new treatments for ACLF are urgently needed. The APACHE randomised control trial investigated whether plasma exchange with Albutein® 5%, an approved human albumin 5% formulation, could improve medium-term survival in ACLF.

APACHE studied 274 patients with ACLF at 29 medical centres worldwide. The study showed that overall survival was significantly improved at 90 days after starting plasma exchange compared to receiving current treatments alone and that plasma exchange was safe. APACHE showed that plasma exchange with Albutein 5% is a promising new therapy for patients with ACLF and can become part of the standard of care in properly selected patients.

*“Plasma exchange with 5% albumin has shown to be a safe and effective liver support therapy, improving the clinical course and 90-day survival of patients with acute-on-chronic liver failure.”* said **Prof. Javier Fernández**, Head of the Liver ICU, Hospital Clínic Barcelona and Head of Clinical Operations, EF CLIF.

**Abstract: Plasma exchange with albumin 5% significantly increases 90-day overall survival in acute-on-chronic liver failure: topline results of the APACHE trial (LBO-002)**

**Session: Late-breaker, Saturday, 30 May, 13:15 - 13:30 CEST**

---

### **Functional cure for chronic hepatitis B: Phase 3 B-Well trials**

Functional Cure (FC, defined as sustained loss of Hepatitis B surface Antigen, HBsAg, with undetectable HBV DNA off all treatment) is rarely achieved with current treatments (~1%) and is the treatment goal for new drugs being developed for HBV. FC means patients no longer require lifelong medication. Achieving FC early prevents the progression of liver disease and reduces the incidence of liver-related complications like liver cancer. The global B-Well 1 and 2 Phase 3 trials evaluated bepirovirsen, an antisense oligonucleotide, given as a 24-week treatment in adults with virologically suppressed chronic hepatitis B infection on current HBV antivirals (nucleos[t]ide analogues, NA).

In the two B-Well studies combined, 19% of participants on bepirovirsen who started with HBsAg between 100-3000 IU/ml achieved FC. A greater effect (26% FC) was shown in participants with lower HBsAg ( $\leq 1000$  IU/ml) on bepirovirsen. No case of FC was observed in the placebo group. The studies showed an acceptable safety and tolerability profile.

Bepirovirsen is a promising new finite therapy for achieving FC in people living with chronic HBV infection.

*“These Phase 3 data represent a major step forward in the search for a finite treatment for chronic hepatitis B,”* said **Prof. Seng Gee Lim**, National University Health System, Singapore, Singapore. *“For patients who currently face long-term therapy, achieving functional cure after a defined course of treatment could fundamentally change expectations for care.”*

**Abstract: Clinically meaningful rates of functional cure in virologically suppressed patients with chronic hepatitis B infection treated with bepirovirsen: B-Well phase 3 trials (GS-001)**

**Session: General Session I, Thursday, 28 May, 10:30 - 10:45 CEST**

---

### **New second-line option for primary biliary cholangitis: EPICS III**

Primary biliary cholangitis (PBC) is a chronic autoimmune liver disease that can progress to cirrhosis and liver failure. Many patients have an inadequate response to, or are unable to tolerate, ursodeoxycholic acid, leaving a need for effective second-line therapies.

Saroglitazar 0.97 mg administered orally once daily demonstrated significant efficacy as a second-line treatment for patients with primary biliary cholangitis (PBC) in a Phase 3 clinical trial. The study showed a significant 48% treatment difference in biochemical response rates, favoring Saroglitazar over placebo, highlighting its potential to address an important unmet need in patients with an inadequate response to first-line therapy. The trial also met its key secondary endpoint: a significantly greater proportion of patients achieved complete normalisation of alkaline phosphatase (ALP) at 52 weeks. Saroglitazar was generally well-tolerated throughout the study period. In addition to improvements in liver biochemistry, patients treated with Saroglitazar experienced sustained reductions in itch severity, with statistically significant improvements observed at six months, although significance was not maintained at the 12-month assessment.

*“The availability of additional therapies such as Saroglitazar could significantly improve our ability to tailor treatment strategies for individuals with PBC who remain inadequately controlled on first-line treatment.”* said **Prof. Raj Vuppalanchi**, Indiana University School of Medicine, USA.

**Abstract: A phase 2b/3 trial of saroglitazar in primary biliary cholangitis (EPICS III) (LBO-001)**

**Session: Late-breaker, Saturday, 30 May, 13:15 - 13:30 CEST**

---

### **Radiotherapy offers effective alternative for small liver tumours: STEREO trial**

For patients with small ( $\leq 3$  cm) liver tumours (hepatocellular carcinoma) that cannot be surgically removed, a heat-based treatment called Radiofrequency Ablation (RFA) has long been the standard care. However, RFA can be technically difficult or even impossible to perform if the tumor is invisible on ultrasound or located near major blood vessels.

Stereotactic Body Radiotherapy (SBRT) is a high-precision technique that focuses intense radiation on the tumour over just a few sessions, maximising the impact on cancer while sparing healthy tissue. The STEREO Phase 3 clinical trial compared these two methods and found that SBRT is just as effective as RFA, with over 90% of patients remaining free of local cancer growth after two years. Notably, SBRT was safe and well-tolerated. These findings establish SBRT as a non-invasive alternative, providing an option for liver cancer patients who face technical challenges with traditional procedures, such as RFA.

*“Our study proves that high-precision SBRT is as effective and safe as traditional heat-based RFA for small liver cancers. It offers a crucial, non-invasive alternative for patients, especially when their tumours are located in areas that are technically difficult to reach with conventional methods.”* said **Prof. Jinhong Jung**, Asan Medical Center, Seoul, South Korea.

**Abstract: Stereotactic body radiotherapy versus radiofrequency ablation for small ( $\leq 3$  cm) hepatocellular carcinoma (STEREO): a randomised, non-inferiority, phase 3 trial (GS-006)**

**Session: General Session I, Thursday, 28 May, 12:15 - 12:30 CEST**

## Hidden burden of alcohol-related liver disease in Europe: LiverScreen

A large European general population screening study involving more than 30,000 adults found that alcohol-related liver disease (ALD) and metabolic and alcohol-related liver disease (MetALD) are not so common in the general population (0.4% and 2%; respectively). Nevertheless, people with these conditions are more likely to have signs of advanced liver scarring (fibrosis) than those with metabolically associated steatotic liver disease (MASLD) alone. Many affected individuals had no symptoms and only mildly abnormal routine liver blood tests, underlining that liver disease can remain hidden for years.

The study highlights the value of earlier identification of liver disease in people with both alcohol use and metabolic risk factors such as obesity or diabetes. Using simple, non-invasive screening tools could help doctors identify patients at higher risk earlier and guide follow-up care before serious liver complications develop.

*“Almost 800 people die every day from liver disease in Europe. Alcohol remains a key driver, often interacting with obesity, diabetes, and other cardiometabolic risk factors. Yet liver disease is frequently detected too late. To better understand how we can improve early detection of alcohol-related liver disease and metabolic liver disease, LiverScreen is investigating the burden of liver disease and associated risk factors across Europe. Our findings reinforce the need for greater awareness, earlier diagnosis, and better identification of at-risk patients before symptoms appear.”* Said **Dr Stine Johansen**, Odense University Hospital, Denmark.

**Abstract: Burden of MetALD and alcohol-related liver disease in the European general population: insights from the 30,199-patient LiverScreen cohort (OS-032-YI)**

**Session: Abstract session: Alcohol, Friday, 29 May, 17:15 - 17:30 CEST**

###ENDS###

---

### Further Information

Media Registration: Accredited media can apply for free registration [here](#)

Programme: For updates to the congress programme see [here](#)

Embargo Policy: Media representatives are asked to familiarise themselves with the official EASL Congress 2026 [Embargo Policy](#)

### Contact

Wouter Kruijs  
EASL Head of Association & Community Services  
Email: [press@easloffice.eu](mailto:press@easloffice.eu)