study aims to determine the effects of vitamin E taken once a day on the LSM. **Methods** NAFLD patients diagnosed by ultrasound who met the inclusion criteria were enrolled in the study. Liver Stiffness Measurement (LSM) measured by FibroScan at baseline and at the end of 3 months. A change in the LSM was the primary objective. Chi-Square analysis was used to measure the change of LSM pre and post-treatment. P value less than 0.05 was considered significant.

Patients were assigned to either the Life style Modification Advice Group (LMAG)–with nutritional counselling and advise to exercise–or the Treatment Group (Vitamin E as Mixed Tocotrienol 100 mg daily for 3 months plus lifestyle modification advise).

**Results** Fifty-seven percent (38/67) of patients enrolled in both arms of the study improved – with a decrease in their LSM measurements – but 43% (29 of 67 (43%) did not.

Of those who improved, 79% (30/38) were from the Treatment Group (Vitamin E) and 21% (8/38) were from the LMAG.

Twenty-nine (29) patients did not improve: 79% (23/29) from the Treatment Group and only 6/29 (21%) from the Treatment Group. Chi-square analysis showed that treatment with Vitamin E had a significant effect (p<0.05) on the improvement of LSM.

**Conclusions** Vitamin E (mixed Tocotrienol) 100 mg daily for 3 months could decrease the LSM among NAFLD patients.

**References**

1. IDDF2018-ABS-0027 INFLUENCE OF HEPATIC STEATOSIS ON THE TREATMENT OUTCOMES OF ENTECAVIR AND TENOFOVIR IN PATIENTS WITH CHRONIC HEPATISIS B

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**Background** The influence of hepatic steatosis (HS) on chronic hepatitis B (CHB) is not well-known. We evaluated the influence of HS, assessed using controlled attenuated parameter (CAP) of transient elastography (TE), on the treatment outcomes in CHB patients who initiated antiviral therapy (AVT).

**Methods** Among 1,658 CHB patients who initiated AVT using entecavir or tenofvir between 2007 and 2016, 334 patients with available TE results at the time of initiating AVT were included. The cutoff CAP value for the diagnosis of HS was 7.0. Of those who improved, 79% (23/29) from the Treatment Group and only 6/29 (21%) from the Treatment Group.

**Results** The HS was not correlated with HCC development after curative resection. However, HS was negatively correlated with the risk of CVR achievement and HBeAg loss among HBeAg positive patients.

**Conclusions** Vitamin E (mixed Tocotrienol) 100 mg daily for 3 months could decrease the LSM among NAFLD patients.