

# WebMD<sup>®</sup>

## LIVING WITH

### PRIMARY BILIARY CHOLANGITIS

#### GOOD TO KNOW

### PBC and your body

page 8

#### TREATMENT SMARTS

### Know your options

page 10

#### FOCUS ON

### Be your best advocate

page 14



COMPLIMENTARY COPY  
TAKE ONE HOME



SCAN ME

Access this guide  
online. Use your  
smartphone camera  
to activate the  
QR code.

SPRING 2026

## INSIDE THE ISSUE

7

### NEWS

The latest research

8

### GOOD TO KNOW

PBC and your body

10

### TREATMENT SMARTS

Know your options

12

### CARING FOR YOU

Lifestyle changes that can help

14

### FOCUS ON

Be your best advocate

16

### BY THE NUMBERS

Stats and facts



*WebMD Living With* is not responsible for advertising claims. *WebMD Living With* (ISSN 1553-9946) is published by WebMD LLC and may not be reproduced in whole or in part without written permission of WebMD LLC. All rights reserved. All editorial content is reviewed by our board-certified physicians, is for informational purposes only, and is not intended to be a substitute for professional medical advice, diagnosis, or treatment. WebMD does not endorse any specific product, service, or treatment. Always seek the advice of your health care provider with any questions regarding a medical condition and never disregard professional medical advice or delay seeking it because of something you have read in a WebMD publication. If you think you have a medical emergency, call your doctor or 911 immediately. 2026 WebMD LLC. All rights reserved.



For adults with primary biliary cholangitis (PBC)

Let **LIVDELZI**  
take on your PBC  
while you take in the moment

**#1 PRESCRIBED  
PBC TREATMENT**  
for people adding  
a second therapy

Source: IQVIA<sup>®</sup> LAAD, 10/2024 through 09/2025.\*

## What is LIVDELZI?

LIVDELZI is a prescription medicine used to treat primary biliary cholangitis (PBC) in combination with ursodeoxycholic acid (UDCA) in adults who have not responded well to UDCA, or used alone in patients unable to tolerate UDCA.

LIVDELZI is not recommended for use in people who have advanced liver disease (decompensated cirrhosis). Symptoms of advanced liver disease may include confusion; having fluid in the stomach area (abdomen); black, tarry, or bloody stools; coughing up or vomiting blood; or having vomit that looks like "coffee grounds."

It is not known if taking LIVDELZI will improve your chance of survival or prevent liver decompensation.

It is not known if LIVDELZI is safe and effective in children.

*Jennifer*  
Real LIVDELZI patient

People featured are  
compensated by Gilead.

## IMPORTANT SAFETY INFORMATION

### What are the possible side effects of LIVDELZI?

**LIVDELZI can cause serious side effects, including:**

- **Bone fractures.** Taking LIVDELZI may increase your risk of bone fractures. Tell your healthcare provider about any bone fractures, or if you develop pain, or have changes in your ability to move around.

**Please see Important Safety Information continued on the next page and Important Facts about LIVDELZI on the back page of this insert.**

<sup>a</sup>This information is an estimate derived from the use of information under license from the following IQVIA<sup>®</sup> information service: IQVIA LAAD, for the period of October 2024 through September 2025. IQVIA expressly reserves all rights, including rights of copying, distribution, and republication.

Ask your healthcare provider if LIVDELZI is right for you.



FOR ADULTS WITH PRIMARY BILIARY CHOLANGITIS (PBC)

AS LOW AS A

**\$0**  
CO-PAY\*

You could pay as low as a  
**\$0 co-pay\***  
with the **LIVDELZI**  
Co-pay Savings Program



**If you have commercial insurance, the LIVDELZI Co-pay Savings Program\* may help you save on your prescribed Gilead medication.**

If you are not eligible for the LIVDELZI Co-pay Savings Program, you can call Support Path® at the number below to learn about other financial support resources and information.

For more information, or to ask about the **LIVDELZI Co-pay Savings Program**, you can connect live with a Support Path program specialist at **1-855-7-MYPATH** (1-855-769-7284) Monday through Friday, 9AM to 8PM ET.



**Explore the Co-pay Savings Program**

\*Co-pay Savings Program is available for commercially insured eligible patients only. Additional restrictions apply. Subject to change; for full terms and conditions, visit [www.mysupportpath.com/co-pay](http://www.mysupportpath.com/co-pay). This is not health insurance. Only accepted at participating pharmacies.

### IMPORTANT SAFETY INFORMATION (continued)

#### What are the possible side effects of LIVDELZI? (continued)

#### LIVDELZI can cause serious side effects, including: (continued)

- **Changes in liver tests.** Increased liver enzymes in the blood have happened when taking more LIVDELZI than prescribed. Your healthcare provider will do tests to check your liver before you start and during treatment with LIVDELZI.

#### Tell your healthcare provider right away if you have any of the following signs or symptoms of worsening liver problems during treatment with LIVDELZI:

- swelling of your stomach area (abdomen) from a build-up of fluid
- yellowing of your skin or the whites of your eyes
- pain on the right side of your stomach (abdomen)
- black, tarry, or bloody stools
- coughing up or vomiting blood, or your vomit looks like "coffee grounds"
- mental changes such as confusion, being sleepier than usual or harder to wake up, slurred speech, mood swings, or changes in personality

**The most common side effects of LIVDELZI include** headache, stomach (abdominal) pain, nausea, abdominal swelling (distension), and dizziness.

Tell your healthcare provider if you have any side effect that bothers you or does not go away. These are not all the possible side effects of LIVDELZI.

#### What should I tell my healthcare provider before taking LIVDELZI?

#### Tell your healthcare provider about all of your medical conditions, including if you:

- have advanced liver disease.
- think you may have a blockage of the bile ducts in your liver (biliary obstruction).
- are pregnant or plan to become pregnant. It is not known if LIVDELZI will harm your unborn baby.

– **Pregnancy safety study.** If you become pregnant while taking LIVDELZI, tell your healthcare provider right away. There is a pregnancy safety study for women who take LIVDELZI during pregnancy. Talk to your healthcare provider about providing information to the LIVDELZI pregnancy safety study. The purpose of this pregnancy safety study is to capture information about your health and your baby's health. You or your healthcare provider can report your pregnancy by calling 1-800-445-3235.

- are breastfeeding or plan to breastfeed. It is not known if LIVDELZI passes into your breast milk. Talk with your healthcare provider about the best way to feed your baby if you take LIVDELZI.

**Tell your healthcare provider about all the medicines you take**, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Certain other medicines may affect the way LIVDELZI works.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit [www.fda.gov/medwatch](http://www.fda.gov/medwatch), or call 1-800-FDA-1088.

**Please see Important Facts about LIVDELZI on next page.**



(liv del' zee)

## ABOUT LIVDELZI

LIVDELZI is a prescription medicine used to treat primary biliary cholangitis (PBC) in combination with ursodeoxycholic acid (UDCA) in adults who have not responded well to UDCA, or used alone in patients unable to tolerate UDCA.

LIVDELZI is not recommended for use in people who have advanced liver disease (decompensated cirrhosis). Symptoms of advanced liver disease may include confusion; having fluid in the stomach area (abdomen); black, tarry, or bloody stools; coughing up or vomiting blood; or having vomit that looks like "coffee grounds".

It is not known if taking LIVDELZI will improve your chance of survival or prevent liver decompensation.

It is not known if LIVDELZI is safe and effective in children.

## BEFORE TAKING LIVDELZI

Tell your healthcare provider about all of your medical conditions, including if you:

- have advanced liver disease.
- think you may have a blockage of the bile ducts in your liver (biliary obstruction).
- are pregnant or plan to become pregnant. It is not known if LIVDELZI will harm your unborn baby.
  - Pregnancy safety study. If you become pregnant while taking LIVDELZI, tell your healthcare provider right away. There is a pregnancy safety study for women who take LIVDELZI during pregnancy. Talk to your healthcare provider about providing information to the LIVDELZI pregnancy safety study. The purpose of this pregnancy safety study is to capture information about your health and your baby's health. You or your healthcare provider can report your pregnancy by calling 1-800-445-3235.
- are breastfeeding or plan to breastfeed. It is not known if LIVDELZI passes into your breast milk. Talk with your healthcare provider about the best way to feed your baby if you take LIVDELZI.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Certain other medicines may affect the way LIVDELZI works.

## IMPORTANT FACTS

This is only a brief summary of important information about LIVDELZI and does not replace talking to your healthcare provider about your condition and your treatment.

## POSSIBLE SIDE EFFECTS OF LIVDELZI

LIVDELZI can cause serious side effects, including:

- Bone fractures. Taking LIVDELZI may increase your risk of bone fractures. Tell your healthcare provider about any bone fractures, or if you develop pain, or have changes in your ability to move around.
- Changes in liver tests. Increased liver enzymes in the blood have happened when taking more LIVDELZI than prescribed. Your healthcare provider will do tests to check your liver before you start and during treatment with LIVDELZI.

Tell your healthcare provider right away if you have any of the following signs or symptoms of worsening liver problems during treatment with LIVDELZI:

- swelling of your stomach area (abdomen) from a build-up of fluid
- yellowing of your skin or the whites of your eyes
- pain on the right side of your stomach (abdomen)
- black, tarry, or bloody stools
- coughing up or vomiting blood, or your vomit looks like "coffee grounds"
- mental changes such as confusion, being sleepier than usual or harder to wake up, slurred speech, mood swings, or changes in personality

The most common side effects of LIVDELZI include: headache, stomach (abdominal) pain, nausea, abdominal swelling (distension), and dizziness.

Tell your healthcare provider if you have any side effect that bothers you or does not go away. These are not all the possible side effects of LIVDELZI.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

## HOW TO TAKE LIVDELZI

Take LIVDELZI by mouth 1 time each day with or without food.

## GET MORE INFORMATION

- This is only a brief summary of important information about LIVDELZI. Talk to your healthcare provider or pharmacist to learn more.
- Go to LIVDELZI.com, or call 1-800-GILEAD-5.



# THE LATEST ON PRIMARY BILIARY CHOLANGITIS

## AN ITCH WORTH TREATING

In people with primary biliary cholangitis (PBC), relentless itching is often brushed aside or left untreated because its severity is misunderstood and effective treatments remain limited. A U.S. study found that those with moderate-to-severe itching experienced poorer sleep, had lower energy, and felt less productive at work. Yet only about 1 in 4 received any itch treatment (such as antihistamines), with the relief rarely lasting. Experts urge people to report itching early, rather than dismissing it as minor, as doing so will help doctors tailor care sooner before it worsens.

SOURCE: *Liver International*

# 45 to 65

**Age group in which PBC is most common  
in the U.S.**

SOURCE: American Liver Foundation

# MORE THAN 100,000

**Estimated number of women in the U.S. who have PBC.**

SOURCE: American Liver Foundation

## KNOW YOUR OPTIONS

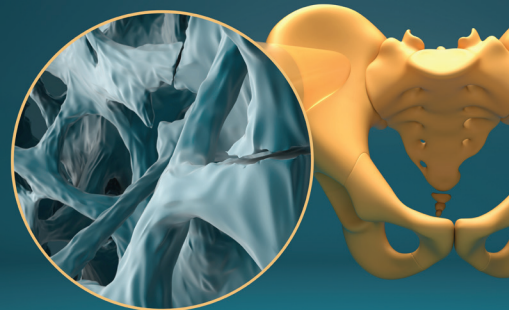
Managing liver health with PBC can be challenging when standard treatments may not bring enough relief. Researchers in the U.S. studied a new medication (such as PPAR-delta agonists) and found that it significantly improved liver health within the first month. More than half of the patients saw improvements in liver enzyme levels, and about 1 in 3 reached normal levels. The medicine was generally well tolerated, with only mild side effects being reported. If you have PBC, talk to your health care team about emerging options that may better protect your liver.

SOURCE: *Alimentary Pharmacology & Therapeutics*

## GET YOUR BONES CHECKED

Did you know liver disease could be weakening your bones without you knowing it? Recent research with more than 400 U.S. adults showed that people with PBC are more likely to develop osteoporosis (a disease that weakens bones) but less likely to have their bone health monitored. Many people had their first bone scan, but follow-up tests were often delayed or missed, showing that bone care is often overlooked. Scheduling regular bone density scans, maintaining healthy levels of vitamin D and calcium, and staying physically active are key steps to protecting your bones and reducing the risk of a fracture.

SOURCE: *The American Journal of Gastroenterology*



This content was created using several editorial tools, including AI, as part of the process. Human editors reviewed this content before publication.

# PBC AND YOUR BODY

This autoimmune condition may start its course through your liver long before you see the signs. Learn what happens.

By Sonya Collins

Reviewed by Brunilda Nazario, MD,  
WebMD Chief Physician Editor, Medical Affairs

**P** primary biliary cholangitis (PBC) can work quietly for years, damaging the delicate network of bile ducts inside the liver long before you notice that anything is wrong.

“Before you show symptoms, the body’s own immune system is attacking the bile ducts,” says David W. Victor III, MD, a hepatologist at Houston Methodist in Texas.

As those ducts become inflamed, bile—fluid the liver makes to help digest fats and carry away toxins—begins to back up, setting off a cascade of injuries that may eventually harden the liver.

## PBC AT A GLANCE

**What:** An autoimmune disease that damages liver bile ducts

**Who:** Mostly women, ages 30 to 60, but no one is immune

**Symptoms:** Fatigue, itching, dry eyes, dry mouth

**Prognosis:** Good, with treatment



## THE IMMUNE SYSTEM ATTACKS

In a healthy liver, bile ducts serve as passageways for bile to travel from the liver to the digestive system. With PBC, the immune system mistakes these ducts for an outsider—a germ or other illness—to be fought off. It then creates antibodies that it hurls at these ducts, causing inflammation.

“The ducts get blocked and eventually destroyed, and bile gets trapped in the liver,” says Nancy Yang, MD, a gastroenterologist and hepatologist at Duke Health in Durham, NC.

With an immune system that’s always in overdrive, you feel worn out. That’s one of PBC’s key symptoms: profound fatigue.

“Any autoimmune process can be energy draining,” Yang says. The fact that this process is an offensive on the liver makes it worse. “The liver is an energy source,” Yang explains. The more damage this organ incurs, the more lethargic you feel.



## BILE BUILDS UP

As bile builds up in your liver and your bloodstream, PBC's hallmark itching begins. "Chemicals in the bile enter the bloodstream, get into the skin, and make the nerves more sensitive," Yang says. This, she explains, leads to the itching.

Because bile helps the body process fat, cholesterol, and nutrients, when its flow is impaired, cholesterol starts to rise, and certain vitamins and nutrients aren't absorbed. "We start to see thin bones and vitamin D deficiency," Victor says.

## ONGOING LIVER DAMAGE

As the immune system continues its assault on the liver, the liver lays down tough scar tissue to protect itself, a process called fibrosis. Without treatment, as thick scar tissue overtakes soft healthy tissue, the liver stiffens over time, a condition called cirrhosis.

## WHAT DOES BILE DO?

**When bile acid can't flow through the liver, it can't do these important jobs.**

- + Break down fats in the food you eat
- + Help your body absorb nutrients for energy and ongoing health
- + Flush waste products out of the body

"Patients who develop cirrhosis from PBC have a risk of liver and bile duct cancers," Victor says. "We recommend screening for these once they reach cirrhosis, but we hope to meet them before that happens."

Once the liver has reached cirrhosis, it can no longer perform its essential tasks that are necessary to keep the body running. At this point, transplant may be the only option.

Fortunately, Yang says, "The progress of PBC is on the slower side and we can slow it further with various medications."

# KNOW YOUR OPTIONS

After decades with no new treatments, now you've got options

By Sonya Collins Reviewed by Brunilda Nazario, MD, WebMD Chief Physician Editor, Medical Affairs

In primary biliary cholangitis (PBC), your immune system attacks the bile ducts in your liver. When bile, an acid that your body produces to help with digestion, can't move through the bile ducts, it builds up and inflames and damages your liver.

There's no cure for PBC, but medication slows its progress and prevents complications. You now have more treatment options than ever before—with others on the way.

"After nearly 20 years with just one treatment option, the past 10 years have been very exciting in the treatment of PBC," says Sasan Sakiani, MD, medical director of Living Donor Liver Transplantation at the University of Maryland Medical Center in Baltimore.

## BILE ACID SEQUESTRANTS

These are your first line of defense against PBC. Taken two to three times a day, these capsules help reduce bile accumulation and move it through the liver.

"They help reduce and normalize the liver enzymes," says James Hamilton, MD, a gastroenterologist at Johns Hopkins Medicine in Lutherville, MD.




While this medication doesn't tend to help with PBC symptoms like itching and fatigue, it improves liver function in about 70% of people, Hamilton says, though some can't tolerate the side effects, which can include weight gain, hair loss, and diarrhea.

## PPAR AGONISTS

If you don't respond to first-line treatments or can't tolerate the side effects, your doctor might prescribe one of

### TIME TO TRY A NEW TREATMENT?

#### Ask your doctor ...

-  How long will it take for my current treatment to work?
-  How will you monitor the treatment's effects?
-  If I'm still itching, does that mean my treatment isn't working?

two new targeted drugs for PBC, known as PPAR agonists. They activate proteins called peroxisome proliferator-activated receptors, which can help move bile through the liver, reduce inflammation, and improve liver function.

"Both of these medications have been shown to have higher biochemical response rates. That is, improvements in the liver enzyme ALP and bilirubin [a liver waste product]," Sakiani says. "ALP normalizes in a significant portion of patients."

Like first-line treatments, these drugs may cause GI problems, like stomach pain, nausea, or diarrhea. Unlike first-line treatments, these new medications may also help with itching and fatigue. In addition to the two PPAR agonists available, Sakiani says, "newer PPAR agonists are also being studied to expand on their success."



## SCRATCH THAT ITCH

Medications for PBC may not provide enough itch relief.

### These could help:

- + Certain cholesterol-lowering drugs also reduce circulating bile that causes itching.
- + An antibiotic used to treat TB helps itching by changing liver enzyme activity.
- + Drugs used to treat substance use disorder can also interfere with nerves involved in itching.
- + Antidepressant SSRIs can block the signals in the brain that trigger itching.

## DRUGS IN THE RESEARCH PIPELINE

Other targeted drugs in development work in different ways. IBAT inhibitors prevent the small intestine from absorbing excess bile acids. “They are showing promise in phase 2/3 clinical trials, particularly for itching,” Sakiani says.

New FXR agonists, in early clinical trials, activate other proteins, farnesoid X receptors, that help regulate bile acids and reduce liver inflammation and damage.

The latest medications for PBC, and those in development, are raising the bar for treatment outcomes. “In the future,” Hamilton says, “we will move the goal post from just improving liver enzyme ALP to normalizing it.”

SOI PRODUCTIONS/VIA GETTY IMAGES

# LIFESTYLE CHANGES THAT CAN HELP

Decisions you make each day make a difference

By Kendall K. Morgan

Reviewed by Brunilda Nazario, MD, WebMD Chief Physician Editor, Medical Affairs

**W**hen you have primary biliary cholangitis (PBC), treatment can help protect your liver. But many other decisions you make each day also can slow progressive damage to your liver over time and make a real difference for your health.

“A healthy lifestyle, including a balanced diet and regular exercise, is crucial to the comprehensive care of PBC,” says Dian Chiang, MD, a hepatologist at Cleveland Clinic in Ohio.

## VITAMIN WATCH

**Your PBC comes with more risk for fat-soluble vitamin deficiencies. Ask your doctor if you should get tested to see if you have one. Common deficiencies include:**

- + Vitamin A
- + Vitamin D
- + Vitamin E
- + Vitamin K

Your PBC also comes with a high risk for osteoporosis or weakening bones. Ask about a bone scan and lifestyle changes to keep your bones strong.



## WHOLESOME DIET

While a healthy diet is good for anyone, it’s especially important when you have liver disease. Your liver makes bile to break down fats. By limiting high-fat foods, you can ease the demands on your liver. While you’ll have many dietary options, a Mediterranean-inspired diet including plenty of plant-based foods works well for many people, Chiang says.

It’s best to avoid saturated fats, which are solid at room temperature. Limit salty and heavily or

RUDISILL/VIA GETTY IMAGES



## YOUR PBC GROCERY LIST

Experts recommend a Mediterranean diet when you have PBC. Along with plenty of fruits and veggies, your shopping list may include:

- + Beans and lentils
- + Nuts
- + Whole-wheat bread
- + Whole grains, such as brown rice
- + Fish
- + Lean meats
- + Olive oil

outcomes in those with advanced fibrosis/cirrhosis.”

### ASK FOR GUIDANCE

Remember that you don't have to do this alone. If you're struggling to get started or unsure whether you're meeting your nutritional needs, talk to your care team about it. It's never a good idea to make big changes to your habits or to eliminate entire food groups from your diet without a doctor's advice. When in doubt, ask for a referral to a registered dietitian, physical therapist, or other professionals who have experience with chronic liver diseases. It's OK to start smaller and work your way up. Healthy foods and exercise will have benefits even if you can't see them at first. Don't let yourself get discouraged and give up.

“Keep moving!” Bansal says. “Steps matter. Even in the absence of weight loss, being active is associated with improved outcomes.”

ultra-processed foods with lots of unfamiliar ingredients in favor of whole foods. Ultra-processed foods include sodas, packaged snacks, candy, hot dogs, and instant soups. Fructose, often found in high-fructose corn syrup, is also best avoided, says Meena B. Bansal, MD, a gastroenterologist at Mount Sinai's Institute for Liver Medicine in New York City. Chiang further recommends avoiding alcohol and quitting smoking.

### MOVE MORE

Bansal says a healthy lifestyle including plenty of exercise is “foundational to your [PBC] treatment regimen.” Aim for 150 minutes per week of moderate- to high-intensity aerobic exercise and strength or resistance training two to three times per week in sessions of about 20 to 30 minutes each.

“The strength/resistance training is particularly helpful as we age and lose muscle mass,” Bansal says. “Low muscle mass is associated with poor liver

# BE YOUR BEST ADVOCATE

Get informed and share your story so others will understand

By Kendall K. Morgan

Reviewed by Brunilda Nazario, MD,  
WebMD Chief Physician Editor, Medical Affairs

**A**dvocating for yourself is an important way to get your health care needs met. It means giving voice to your needs, wishes, questions, and concerns, enabling you to serve as an active member of your care team. While self-advocacy is always key, it can be especially critical when you have a condition such as primary biliary cholangitis (PBC). You'll need to advocate for yourself not only with your liver care team but with all your care providers.

"Anyone who has a rare disease like PBC needs to learn to advocate for themselves because every health care provider they encounter will not know about PBC or be updated on the latest treatments available," says Carol Roberts, president of the Rochester, New York-based PBCers Organization, an online and in-person support group for people with PBC. "It is important that they all be aware of your diagnosis so when you are being treated for any other health issues your liver disease is considered, and nothing is done contrary to your liver. As an educated patient you should speak up and ask questions, be a part of your own care plan."

## GET INFORMED

Roberts says the first step to becoming your own best advocate is educating yourself on your disease. She advises learning all you can about symptoms and changes you should watch out for. Consider joining a support group to learn from others who've been there. Read up or watch webinars that explain PBC and its treatment in detail.



"Being well informed allows you to understand and discuss your treatment plan with your treating physician," Roberts says.

## MANAGING YOUR SYMPTOMS

Monika Sarkar, MD, a liver specialist at UCSF Health in San Francisco, notes the importance of pushing for treatment options that can help not only with your liver but also with the "extrahepatic manifestations of PBC." About 3 in 4 people with PBC will have autoimmune-related problems and symptoms outside the liver. Symptoms of PBC include fatigue, itchy skin, dry eyes, joint pain, and more.

"Sometimes people may be given lifestyle recommendations like lowering the temperature



of the shower or using creams not lotions without providers offering more aggressive treatment to deal with itching,” Sarkar says. “It can be debilitating.”

She says it’s important to ask about all your treatment options and how they can help with itching or any other troubling symptoms you have, to ensure you’ll have the best quality of life possible despite your PBC diagnosis.

### SHARE YOUR STORY





Your role as a self-advocate need not be limited to health care settings, according to Roberts.

“Many patients have said they don’t feel people understand how their PBC affects them,” Roberts says. “Advocating for yourself includes making sure you’re sharing your story so others can learn about PBC. Throughout your journey, you will need other’s help and understanding.”

### ASK AWAY

**When you have PBC, it’s important to ask questions.**

**Here are a few to get you started:**

-  How much liver damage do I have?
-  What treatment do you recommend, and will it slow the damage?
-  What else can I do to protect my liver?
-  Can PBC treatment help my symptoms, including the itch?

# STATS & FACTS

Reviewed by Brunilda Nazario, MD,  
WebMD Chief Physician Editor,  
Medical Affairs

# 9x

Rate at which women  
are more likely to develop  
primary biliary cholangitis (PBC)  
than men.



# ABOUT 100x

How likely you are to develop PBC when close family members (parents, siblings, or children) have the disease.



# 58%

Amount of people with PBC who experience itching.

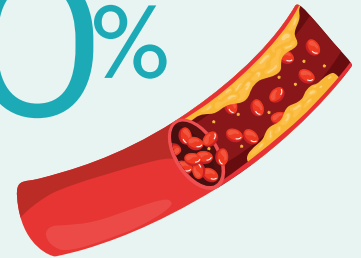


# 1.6x

How much more likely people with PBC are to have fractures from weak or fragile bones compared with those without the disease.

# UP TO 80%

Amount of people with PBC who have high cholesterol levels.



# 15 to 20

Average number of years it takes for PBC to progress to its advanced or terminal stage.

# ABOUT 54%

Amount of people with PBC who were treated by a specialist (such as a gastroenterologist or a hepatologist), based on a U.S. study with more than 36,000 adults.



SOURCES: American Liver Foundation, Mayo Clinic, Medscape, *Hepatology Communications*, Cleveland Clinic, PBC Foundation  
This content was created using several editorial tools, including AI, as part of the process. Human editors reviewed this content before publication.