

中文題目:以干擾素為基礎治療慢性 C 型肝炎可降低類風濕性關節炎的風險

英文題目:Interferon-based therapy for chronic hepatitis C reduces the risk of rheumatoid arthritis: a population-based cohort study

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**Background:** Previous research reported that hepatitis C virus (HCV) infection is associated with development of rheumatoid arthritis (RA). We determined the effect of interferon-based therapy (IBT) for HCV on the risk of RA.

**Methods:** Analysis of the Taiwan Longitudinal Health Insurance Database 2005 indicated 17,080 HCV-infected patients between 1997 and 2012. We identified 2024 HCV-infected patients who received IBT (treated cohort) and used 1:4 propensity score-matching to select 8096 counterparts who did not receive IBT (control cohort). The cumulative incidence and hazard ratio (HR) for RA were calculated after adjusting for competing mortality.

**Results:** This propensity score-matched study of HCV-infected patients indicated the risk of RA was significantly lower in the treated cohort (16-year cumulative incidence [CI]: 4.0%; 95% CI: 2.8-5.7%) than in the control cohort (16-year CI: 6.3%; 95% CI: 5.2-7.4%;  $p < 0.0001$ ), with an adjusted HR (aHR) of 0.52 (95% CI: 0.37-0.72;  $p < 0.0001$ ). This relationship also held in the overall HCV cohort. The risk of RA was lowest in patients who received 6 months or more of IBT (aHR: 0.39; 95% CI: 0.21-0.71;  $p = 0.002$ ). Multivariable stratified analysis verified the association of IBT with reduced risk of RA in all subgroups of patients.

**Conclusions:** Our data imply that IBT for HCV-infected patients, especially for 6 or more months, reduces the risk of RA.