

中文題目：HBeAg 陰性的慢性 B 型肝炎患者接受干擾素，HBsAg 的基準值和治療後的數值預測長期 HBsAg 的消失

英文題目：Baseline and End-of-treatment HBsAg Levels Predict Long-term HBsAg Loss After Peginterferon Therapy in HBeAg-negative Chronic Hepatitis B

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ABSTRACT

Background & Aim

Predictors of long-term HBsAg loss after peginterferon (PegIFN) therapy for HBeAg-negative chronic hepatitis B (CHB) patients are limited. The aim of this study was to evaluate the predictive value of baseline and on-treatment HBsAg levels for long-term HBsAg loss in HBeAg-negative CHB patients undergoing PegIFN therapy in a prospective cohort.

Methods

Consecutive 68 HBeAg-negative CHB patients undergoing PegIFN therapy were prospectively enrolled. Serial serum HBV DNA, hepatitis B surface antigen (HBsAg), levels were measured. Sustained off-treatment virological response (SVR) was defined as HBV DNA <2000 IU/mL in HBeAg-negative patients after 12 months of the end of treatment (EOT).

Results

SVR was achieved in 18 (31%) of patients and 23 patients (39.7%) developed HBV relapse and restarted HBV antiviral therapy during the follow-up period. During a median follow-up period of 6.1 years after PegIFN therapy, HBsAg loss and HBsAg seroconversion were observed in 6 (10.3%) and 4 (6.9%) of patients, respectively. Baseline HBV DNA <8 x 10⁵ IU/mL (odds ratio (OR)=5.357, p=0.021) and HBsAg decline at week 12 >10% (OR=26.290, p=0.004) were independent predictors of SVR. The incidence of HBsAg loss at 3, 5, 7, 9 years after PegIFN therapy were 11.1%, 17%, 27.4%, 51.6% and 0%, 0%, 0%, 6.7% in patients with and without SVR, respectively. In univariate analysis, baseline HBsAg <750 IU/mL (hazard ratio (HR)=10.544, p=0.32), HBsAg decline at week 24 >80% (HR=10.966, p=0.006), HBsAg decline at EOT >1 log (HR=27.605, p=0.003), and achieving SVR (HR=14.704, p=0.14) were significantly associated with long-term HBsAg loss. By

multivariate analysis, HBsAg decline at EOT >1 log (HR=25.127, p=0.004) was the only significant predictor of HBsAg loss.

Conclusions

Baseline HBsAg levels and HBsAg declines at EOT were predictors of long-term HBsAg loss after Peg-IFN therapy in HBeAg-negative patients.

Key words: chronic hepatitis B; hepatitis B virus; CXCL9; peginterferon; virological response; HBsAg loss.