

RIBAVIRIN PLUS PEGYLATED INTERFERON IN THE TREATMENT OF CHRONIC HEPATITIS B AND C

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BACKGROUND/AIMS: Concurrent chronic hepatitis B virus and hepatitis C virus infection appears to increase the risk of progressive liver disease and therapies for them have been unsatisfactory. We conducted a prospective study using ribavirin plus pegylated interferon to treat chronic hepatitis B and C patients.

METHODS: A total of 47 patients with clinically and pathologically verified chronic hepatitis B and C were included. All patients received pegylated interferon alfa 2a or 2b via subcutaneous injection once weekly plus oral ribavirin 800-1200 mg daily for 24 weeks. Regular clinical assessment, biochemical and virological follow-up were performed. Treatment efficacy was assessed at the end of the 24-week treatment (EOT) and 24-week follow-up (EOF). Statistical analysis was performed using Chi-square test, Fisher's exact test and stepwise logistical regression model where appropriate.

RESULTS: The mean age was 56 years with 72% male. Twenty-eight percent had liver cirrhosis. All patients were seropositive for HCV RNA and 64 % were infected with genotype 1b, in contrast to 17% who were seropositive for HBV DNA. The mean pretherapy levels of biochemical tests were: ALT 158 U/L; total bilirubin 1.0 mg/dL; albumin 4.4 gm/dL. At EOT, the ALT normalization rate (biochemical response, BR), HCV seroclearance rate (virological response; VR) or both (complete response; CR) were 65%, 84% and 61%, respectively. When assessed at EOF, the BR, VR and CR were 54%, 57% and 39%, respectively. The stepwise logistical regression analysis showed no clinical predictor to response.

CONCLUSIONS: Ribavirin plus pegylated interferon was effective in the treatment of chronic hepatitis B and C.

Keyword: chronic hepatitis B and C, ribavirin plus pegylated interferon, biochemical and virological response