

NEWSLETTER INTERNATIONAL PUBLICATIONS

Issue 4, Vol 1, September 2010

Evaluation of the Efficacy and Safety of Pegylated Interferon α -2a 160 μ g (Reiferon Retard®) and Ribavirin Combination in Chronic HCV Genotype 4 patients

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Background:

Egypt has a very high prevalence of HCV. Genotype 4 is the predominant genotype in Egypt, and has been isolated from up to 91% of HCV-infected persons. Currently, the major challenge regarding therapy is that new approaches are needed to increase the SVR rates and to decrease treatment side effects.

Aim:

To assess the efficacy and safety of Hansenula-derived 20-kDa linear Pegylated Interferon alfa-2a (160 μ g/week) / Ribavirin Combination therapy for treatment of Chronic HCV genotype 4 Egyptian patients.

Design:

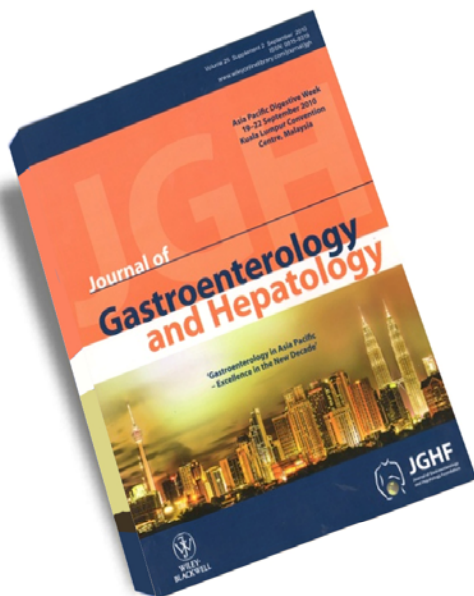
One-Hundred and two patients with Chronic hepatitis C genotype 4 were treated with Peg-Interferon alfa-2a (160 μ g/week) plus dose adjusted ribavirin (according to body weight 13mg/kg) for 48 weeks. Early Virological Response (EVR), End of Treatment Response (ETR), Sustained Virological Response (SVR), possible side effects and discontinuation of the drug were reported.

Results:

At week 12, early virological response was achieved in 76.47% of patients (78 out of 102 patients). Undetectable HCV RNA levels at week 24 were achieved in 73.52% of patients (75 out of 102 patients). At Week 48, End of treatment response (ETR) rate was 66.67% (68 out of 102 patients). Sustained Virological Response was achieved in 64.7% of patients (66 out of 102 patients). All Hematological side effects were mild to moderate without the need of dose reduction or discontinuation of treatment.

Conclusion:

We document the efficacy of the novel Hansenula-derived Peg-Interferon alfa-2a (160 μ g/week) in the treatment of HCV genotype 4 Egyptian patients, with a lower incidence of hematological side effects than reported with other pegylated interferons.



Asia Pacific Digestive
Week Kuala Lumpur,
Malaysia September 2010