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Retrospective Review on the Use of Pegylated Interferon alfa and Ribavirin for Chronic Hepatitis C in Hong Kong

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Introduction

Despite the advent of direct-acting antivirals (DAAs) in chronic hepatitis C infection, combination therapy using pegylated interferon α and ribavirin (PR) is still the current standard of care in Hong Kong.

Objectives

Our aim is to investigate the use of pegylated interferon alfa and ribavirin for treatment of chronic hepatitis C in Hong Kong.

Methodology

Total 723 anti-HCV positive patients who attended out-patient clinic of Department of Medicine, Queen Elizabeth Hospital from January 2002 to March 2014 were reviewed for their characteristics and reasons for declining treatment. Total 143 patients received combination therapy. Their characteristics, response to treatment and side effects of treatment were retrospectively analyzed.

Result

Total 143 patients (99 male, 44 female) with median age of 50 received PR-based combination therapy. Treatment uptake rate was 19.8%. Genotypes 1 and 6 were commonest. Intravenous drug abuse was the commonest mode of acquisition of HCV (54.9%). Overall SVR rate was 72.7%. Genotype 6 infection performed significantly better than genotype 1 infection (89.3% vs. 62.5%; $p=0.008$). Multivariate analysis identified non-genotype 1 infection, low baseline HCV RNA level, those without prior history of combination therapy and those who completed $\geq 80\%$ of treatment as predictors of SVR. Side effects occurred in 88.1%. Thirty-two patients (22.4%) terminated treatment early due to side effects.