

## Seven-years follow-up on trial of Interferon alpha in patients with HCV RNA positive chronic hepatitis C

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### Abstract

**AIM:** To study the long term efficiency of therapy with Interferon alpha (IFN- $\alpha$ ) in patients with HCV RNA positive chronic hepatitis C.

**METHODS:** Ten patients were enrolled in the study, whose age 31-62 year (mean 53 year), course 6-72 mo (mean 24 mo), of whom, 6 patients with mild CHC, 4 moderate CHC. All patients received IFN- $\alpha$  3 MU three times weekly for six to twelve months, and then followed up for seven years after the end of treatment. The results of hepatic functions and HCV RNA at the end of treatment and follow-up period in all patients were observed.

**RESULTS:** (1) At the end of treatment, clinical symptoms recovered obviously in all patients, virological response (defined as HCV RNA loss) occurred in 5 of 7 (71.4%) patients (< 60 years old) and in 1 of 3 (33.3%) patients (> 60 years old). At the end of follow-up, the rates of HCV RNA loss were 42.9% (3/7) and 33.3% (1/3), respectively, in these group. Virological sustained response (defined as HCV RNA loss at the end of treatment and follow-up) occurred in 3 of 6 (50%) patients (6-12 mo-course) and in 1 of 4 (25%) patients

(> 12 month-course). A sustained HCV RNA response was observed in 2 of 7 (28.6%) patients with IFN- $\alpha$  therapy for 6 m and in 2 of 3 (66.7%) patients with IFN- $\alpha$  therapy for more than 6 m. Of all patients, 4 patients with sustained HCV RNA response were mild CHC, 4 patients with sustained HCV RNA positive were mild CHC (2 patients), moderate CHC (2 patients), respectively; other 2 patients with HCV RNA loss at the end of treatment but recurred at the end of follow-up, were moderate CHC. (2) Biochemically sustained response (defined as ALT normalization at the end of treatment and follow-up) was observed in 5 out of 10 (50%) patients, and these 5 patients were mild CHC, of whom, 4 patients with HCV RNA sustained negative, 1 patient with HCV RNA loss and then recurred again. Two patients with ALT normalization at the end of follow-up were one mild CHC, one moderate CHC, respectively. Other 3 patients with no response were moderate CHC, of whom, 2 patients with HCV RNA sustained positive, 1 patient with HCV RNA loss then recurred, and in these 3 patients, the lower limits of ALT were more than 121-148 U/L. (3) Of 10 patients, 3 moderate CHC patients were far from satisfactory to IFN- $\alpha$  therapy, of whom, 2 coinfecting with HBV, 1 with post-hepatitis cirrhosis.

**CONCLUSION:** The CHC patients with younger age, shorter course, and lighter liver changes in biopsy (mild CHC) have better response to IFN- $\alpha$  therapy, and the efficiency of therapy with IFN- $\alpha$  for 12 m are more satisfactory than those for 6 m. The patients with coinfecting HCV and HBV have a response to IFN- $\alpha$  therapy worse than the others.

**Key words:** Hepatitis C virus; Hepatitis C; Interferon-alpha; Follow-up studies; RNA

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