

Pegylated interferon alfa-2a therapy for HBeAg-negative chronic hepatitis B in Taiwan

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Introduction: Pegylated interferon (peg-INF) alfa-2a therapy for HBeAg-negative chronic hepatitis B patients has already verified for the effective and safety treatment method. Whether peg-INF alfa-2a is effective for the treatment of these patient remain unclearly in Taiwan.

Aim and method: The aim of this study was to evaluate the efficacy and predictors of peg-INF alfa-2a therapy for HBeAg-negative chronic hepatitis B patients in Taiwan. Fifty HBe-negative patients were enrolled to receive the 48-week treatment of 180 ug peg-INF once weekly and follow up at 24-week after end of treatment. Liver biopsy was obtained for patients at the start of therapy. HBV DNA, HBsAg level and HBV genotype were analysed at baseline. HBV DNA and HBsAg level were measured during therapy process (weeks 12, 24, and 48) and also at 24-week after end of treatment. Combined response was defined as normalized serum alaine aminotransferase (ALT) and HBV DNA $\leq 10^4$ copies/mL. Sustained virological response (SVR) was defined as undetectable serum HBV DNA (≤ 312 copies/mL).

Result: There were 50 patients (40 males and 10 females) in the study and the mean age was 44 ± 12 years (range, 22 to 67 years). Average ALT was 97.6 ± 63.35 IU/L (range 21 to 284 IU/L), HBV DNA was 6.28 ± 1.97 log copies/mL, and 80% was genotype Type B. Twenty-four weeks after treatment cessation, combined responders were 24 (48%) and normalized ALT with SVR were 15 (30%). Baseline ALT was a significant predictor of combined response to treatment ($p=0.021$).

Conclusion: Peg-INF alfa-2a was an effective treatment for HBeAg-negative chronic hepatitis B in Taiwan.