

中文題目：干擾素及直接作用抗病毒藥物在同時感染慢性 B 型肝炎病毒及 C 型肝炎病毒的台灣人之結果研究

英文題目：Impact of interferon-based therapy and direct-acting antiviral agent therapy on clinical outcome of patients with chronic HBV/HCV coinfection: a real world setting in Taiwan

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Background : The effects of interferon (IFN)-based therapy and direct-acting antiviral agent (DAA) therapy upon hepatitis B surface antigen loss and liver function among hepatitis B virus (HBV) and hepatitis C virus (HCV) coinfecting patients are unknown. We conducted the study to explore the effects of HCV treatment on HBV-HCV coinfecting patients.

Materials and Methods : The retrospective study was conducted at Taipei Veterans General Hospital (VGH). We included the patients with HCV-HBV coinfection and received HCV therapy (n=195). We identified those treated with IFN-based therapy (n=78) or DAA therapy (n=73) after excluding those without achieving HCV sustained viral response (SVR) (n=44).

Result : HBsAg loss rate within 3 years after starting IFN based therapy was 1.28%, 2.56% and 7.69% from the first year to the third year, respectively. Among those treated with DAA therapy, the HBsAg loss rate was 1.37% within 3 years. Patients with baseline (BL) FIB-4 score > 3.25 had significant improvement at end of follow up (EOF) compared with baseline in both IFN (BL FIB-4 score 5.5, and 3.52 at EOF, p value = 0.001) and DAA group (BL FIB-4 score 6.64, and 4.31 at EOF, p value = 0.011). Significant reduced AFP was also noted in IFN (BL AFP 14.29 ng/ml, and 6.37 ng/ml at EOF, p value=0.001) and DAA group (BL AFP 4.79 ng/ml, and 3.13 ng/ml at EOF, p value=0.001).

Conclusion : Higher HBsAg loss rates was noted in IFN group. Both therapy had significant improvement on FIB-4 score among those with baseline FIB-4 score > 3.25 and AFP level.