

Extended hepatitis C treatment after liver transplant may benefit patients

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Extending hepatitis C treatment for liver transplant patients beyond current standards results in high clearance rates of the hepatitis C virus from the blood, and a low relapse rate, according to a study by Henry Ford Hospital.

"We found that patients who achieved a sustained virological response were more likely to have had extended treatment after transplant," says Matthew Moeller, M.D., gastroenterology fellow at Henry Ford Hospital and lead author of the study.

"In the study, we saw a trend toward decreased mortality as sustained virological response was found to be associated with a 100 percent five-year survival rate vs. 86 percent for those without."

Although, statistically insignificant, the trend could show significance with longer follow-up and a larger sample size, explains Dr. Moeller.

Study results will be presented May 2 at the Digestive Diseases Week conference in New Orleans.

The study looked at 241 consecutive [liver transplant](#) patients from 1999-2006. Patients were offered treatment if they tested positive for [hepatitis C](#), had recurrent hepatitis C with at least Stage I fibrosis on biopsy, and stable [immunosuppression](#) for a minimum of three months. Patients received either non-pegylated interferon tiw or pegylated interferon weekly in combination with ribavirin.

Of the study patients with hepatitis C, 66 were eligible for treatment, and 22 achieved sustained virological response. Only two patients (8 percent) relapsed. This is in contrast to typical relapse rates of 30-35 percent in non-transplant patients treated with standard therapy. Genotype 1 patients failed more than genotype 2 or 3 patients in achieving sustained virological response (27 percent vs. 70 percent).

Dr. Moeller notes that 35 percent of patients who went on to achieve sustained virological response first became virus-negative at or following week 24.

"Our results suggest that even if patients are positive at week 24, there is still a 35 percent chance that they can achieve sustained viral clearance with extended treatment," says Dr. Moeller.

Provided by Henry Ford Health System

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