

EFFICACY AND SAFETY OF TELAPREVIR IN PATIENTS WITH CHRONIC HEPATITIS C

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BACKGROUND

The addition of telaprevir to standard therapy, considerably improves response rates and allows reducing the duration of treatment in a significant number of patients.

PURPOSE

Assess the efficacy and safety of telaprevir in combination with peginterferon alfa-2b and ribavirin (RBV) in patients with hepatitis C virus genotype 1 (HCV).

MATERIALS AND METHODS

- Study observational retrospective of monoinfected patients HCV genotype 1, naïve and pretreated, who started treatment with telaprevir.
- The follow-up period was 24 weeks.
- We defined three types of patients:
 - **Relapsed patients:** those with undetectable viral load at the end of treatment but detectable at 24 weeks follow-up.
 - **Parcial responders:** patients with $\geq 2\log_{10}$ decline in viral RNA at week 12 but without undetectable viral load at week 24.
 - **Null responders:** patients with $< 2\log_{10}$ decline in viral RNA at week 12.
- Some of the variables used were the degree of fibrosis, the basal viral load, at week 4 and at week 12 (IU/ml), the duration of the treatment in weeks, the basal dose of RBV (mg/day), the basal hemoglobin, at week 4 and at week 12 (mg/dl), the need for blood transfusions and support with erythropoietin and the skin toxicity (mild/moderate/severe).

RESULTS

- We included 16 patients (81.3 % men and 18.8 women).
- 15 patients presented undetectable viral load at week 4 and 12, reducing the duration of treatment to 24 weeks.
- RBV dose was reduced in 6 patients and 2 patients started with a dose of 600 mg, in both cases without compromising treatment success.
- 7 patients had anemia, of which 2 required transfusions and erythropoietin.
- 12 cases had skin toxicity (8 mild, 3 moderate and 1 severe with subsequent interruption of treatment at week 4).

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| Undetectable viral load at week 4 15 | Undetectable viral load at week 12 14 |
| 16 patients | |
| Anemia 7 | Skin toxicity 12 |



CONCLUSIONS

The data confirm those reported in the ILLUMINATE study, with high rates of rapid virological response and reduction of treatment from 48 to 24 weeks, but with a higher rate of skin toxicity although most mild to moderate.