

Case Challenges in Managing Prior HCV Treatment Failure

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**HEPATITIS C TREATMENT EXPANSION INITIATIVE
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History

- 56 year old Hispanic man with well controlled HIV. He is co infected with HCV and failed treatment twice - most recently 7 years ago with another provider.

Prior HCV Work-Up

- Liver Biopsy 2005
 - Inflammation grade 3 of 4; Fibrosis grade 3 of 4
- Abdominal Ultrasound 2010
 - Mild splenomegaly; no liver masses
- Treatment History
 - 1994 – interferon alfa – 3 million units 2x/week
 - Detectable virus @ 24 weeks – treatment terminated
 - 2005 – pegIFN alfa 2a 180 µg + RBV 400/600 mg
 - >2log HCV VL reduction @ 12 weeks
 - Undetectable @ 24 weeks
 - No SVR 6 months after 48 week treatment course
 - Patient reports some missed RBV doses

Current Clinical Status

- Social History: Glass of wine 2-3x/week, no tobacco or drug use
- PMH: HIV – currently taking tenofovir/emtricitabine/efavirenz – VL undetectable, CD4 445 cells/mm³
- No history of depression
- BMI 30

Current Laboratories

LAB	RESULT	LAB	RESULT
HCV RNA	3.7 million IU/mL	CD4 count	445 cells/mm ³
AST/ALT	75/67 U/L	Hemoglobin	14.0 g/dL
Total bilirubin	0.8 mg/dL	Platelets	105,000
Albumin	3.0 g/L	HIV RNA	< 50 copies/mL
Creatinine	0.7 mg/dL	HAV total Ab	+
INR	1.0	HBV Sab/core	+/-
WBC	5000 cells/mm ³	HBV Sag	-

Treatment Considerations

- Is there any further work-up you would perform before deciding about treatment?
- What, if any, treatment options are available for the patient?
- Are there any considerations regarding the timing of treatment?
- What support resources may be important to improve his chance of success?

Follow-Up Data

- The patient begins your prescribed course of treatment:
- Week 4 HCV Viral Load: 980,000 IU/mL
- Week 12 HCV Viral Load: 25,000 IU/mL
- Week 12 Hgb – 10.1 g/dL
- He reports some dyspnea when walking between floors on the stairs at work

Management Considerations

- Should treatment be continued?
- If so, how long?
- Should any medication dose changes be made?
- Any additional medications?
- Do any other clinic resources need to be accessed?

Ongoing Follow-Up

- At week 24, the patient reports some sleep difficulty and has a blunted affect. His CES-D (Center for Epidemiologic Studies – Depression) Score is 21 consistent with mild to moderate depression.

Management Considerations

- Any changes to therapy?
- Any additions to therapy?
- How are mental health services accessed for your clinic population?

End of Treatment

- The patient's end of treatment response (ETR) shows HCV VL <43 IU/mL
- 12 week post treatment: <43 IU/mL
- 24 weeks post treatment: <43 IU/mL

Ongoing Management Considerations

- How may this patient assist in your clinics ongoing HIV/HCV program?
- If antidepressants were initiated for treatment-emergent depression, how long should they be continued?
- Is any further screening for hepatocellular carcinoma required?