中文題目：血糖異常能預測慢性 C 型肝炎基因型 1 型病患以長效型干擾素合併 Ribaririn 之治療反應

英文題目：Glucose abnormalities predicted treatment response to pegylated interferon alfa plus ribavirin combination therapy in chronic hepatitis C genotype-1 patients

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BACKGROUND: Glucose abnormalities are common characteristic features associated with chronic hepatitis C (CHC) infection. The aim of this study was to elucidate the role of glucose abnormalities in the response to pegylated interferon (pegIFN) alfa plus ribavirin combination therapy among CHC patients.

METHODS: The status of glucose abnormalities in CHC patients without diabetes mellitus (DM) was validated by a 75-g oral glucose tolerance test (OGTT) before therapy. All the non-diabetic patients received combination therapy with pegIFN and weight-based ribavirin 1000–1200 mg/day for 24 weeks with a 24-week follow-up period.

RESULTS: A total of 413 consecutive CHC patients were enrolled in this study. The overall sustained virologic response (SVR) rate was 78.5%. Validated by OGTT, 28.3% patients were of normoglycemic, 38.3% were pre-diabetic, and 33.4% were DM, respectively. In 176 patients with genotype-1 infection, 113 (64.2%) patients who achieved an SVR had higher proportion of normoglycemia (p = 0.03) than their counterparts. However, there was no significant difference of SVR rate between patients with (113/125, 90.4%) and without (36/40, 90.0%) glucose abnormalities in genotype-2 patients (p= 1.00). Multivariate logistic regression analysis demonstrated that pretreatment normoglycemia (Odds ratio= 2.24, 95% confidence interval= 1.02–4.92, P=0.04) was independent predictors for SVR only in genotype-1 patients but not in genotype-2 patients.

CONCLUSIONS:
The clinical application for determination of abnormal glucose metabolism by OGTT seems only helpful to predict response and develop individualized therapy for genotype-1 CHC patients.