中文題目:以 sofosbuvir/daclatasvir 合併治療台灣慢性 C 型肝炎患者的療效和安全性 英文題目:Efficacy and safety of sofosbuvir/daclatasvir combination therapy for Taiwanese patients with chronic hepatitis C virus infection

作 者:周敬晏 1 ,梁博程 1 ,林宜竑 1 ,侯乃仁 1 ,謝明彦 1 黄駿逸 1 ,黄釧峰 1,2,3 ,葉明倫 1,3 , 黄志富 1,3 , 戴嘉言 1,2,3 ,莊萬龍 1,3 ,余明隆 1,3

服務單位:¹高雄醫學大學附設中和紀念醫院內科部²健康管理中心³高雄醫學大學醫學院醫學系

Background: The combination therapy with sofosbuvir and daclatasvir was reported well tolerated and achieved high sustained virological response (SVR) rates in patients with chronic hepatitis C virus (HCV) genotype 1 and/or 2 infection. Recently, APASL, EASL and AASLD guidelines-recommended sofosbuvir and daclatasvir for pan-genotype hepatitis C virus infection. The studies aimed to survey the efficacy and safety of dual therapy with sofosbuvir and daclatasvir in Taiwanese patients with HCV genotype 1 and/or 2 infection.

Materials and Methods:

We retrospectively analyzed clinical data from chronic HCV genotype 1 and/or 2 patients treated with sofosbuvir and daclatasvir at Kaohsiung Medical University Chung-Ho Memorial Hospital. Total 30 patients (8 males and 22 females, mean age: 65.6 ± 10.4 years) have been treated with dual therapy for 12 weeks and followed up for 12 weeks.

Results: All patients achieve undetectable HCV RNA at 12 weeks after cessation of therapy (SVR12). With sofosbuvir and daclatasvir therapy, 20 (66.7%) patients at week 4, 27(90%) patients at week 8 and 29 (96.7%) patients at EOT had undetectable HCV RNA (one patient with unquantifiable HCV RNA). The serum aminotransaminase levels were improved after the treatment. The mean (range) baseline creatinine, AST, ALT and total bilirubin (T-bil) levels were: 0.8 5(0.53-2.31) mg/dL, 72.0(23-202) IU/L, 67.9 (15-223) IU/L and 1.15 (0.4-3.0) mg/dL. No patient experience acute exacerbation/decompensation at EOF.

Conclusion: We report the real-world experience of sofosbuvir and daclatasvir combination therapy which achieved very high SVR rates and was well tolerated in Taiwanese patients with HCV genotype 1 and/or 2 infection. Further results of large number of treated patients are mandatory.