

中文題目：使用全口服抗病毒藥物治療器官移植術後的慢性 C 型肝炎病人有極佳的療效及良好的耐受性

英文題目：Highly effective treatment response and well tolerability by all oral direct acting antivirals for chronic hepatitis C patients post organ transplantation

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**Background:** For chronic hepatitis C (CHC) patients received organ transplantation (Tx), an accelerated course of fibrosis progression was documented due to immunosuppressants use. Sustained virological response (SVR) rates for these patients by pegylated interferon (IFN)-based therapy are generally poor and associated with unfavorable safety profiles. Besides, IFN treatment was contradictory for patients post renal Tx due to high risks of graft rejection. This study was aimed to investigate the efficacy and safety of all oral direct acting antivirals (DAAs) for CHC patients after organ Tx.

**Methods:** 32 consecutive post organ Tx (liver: 17, kidney: 13, kidney then liver: 1, heart: 1) CHC patients who treated with all oral DAAs (paritaprevir/ritonavir, ombitasvir and dasabuvir: 11, daclatasvir and asunaprevir: 4, sofosbuvir-based: 17) were enrolled. Selection of DAAs regimen was based by genotype/subtype, patient characteristics, drug to drug interaction profiles and criteria of Health-Insurance reimbursement.

**Results:** Mean age of patients was 61.4±9.5 years, 50.0% of them was male and 15.6% have cirrhosis. Fourteen (43.7%) of them failed to previous IFN. Genotype distribution was as follows: 1a: 6, 1b: 17, 2: 7, 3: 1 and 6: 1. Mean time between Tx and DAAs therapy was 77.3±11.0 months. Baseline HCV RNA level before DAAs was 6.20±0.19 log<sub>10</sub> IU/mL. After DAAs, the distribution of week 2 HCV RNA level was as follows: < 15 IU/mL (53.1%), 15 to 50 IU/mL (15.6%), 50 to 100 IU/mL (6.3%), and > 100 IU/mL (25.0%), respectively. The rates of undetectable HCV RNA (< 15 IU/mL) at week 4 and end-of-treatment were 93.8% and 100%. Subjective adverse events during therapy were generally mild and no patients early terminated therapy. After post-treatment follow, all 32 patients (100%) achieved SVR<sub>12</sub>.

**Conclusion:** For difficult-to-treat subpopulation like CHC post organ Tx, highly effective treatment response and well tolerability were achieved by all oral DAAs.