UNIVERSITI TEKNOLOGI MARA

CLINICAL PROFILE AND RESPONSE TO TREATMENT WITH PEGYLATED INTERFERON PLUS RIBAVIRIN FOR CHRONIC HEPATITIS C PATIENTS IN SELAYANG HOSPITAL

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AUTHOR'S DECLARATION

I declare that the work in this dissertation was carried out in accordance with the regulations of Universiti Teknologi MARA. It is original and is the result of my own work, unless otherwise indicated or acknowledged as referenced work. This writing has not been submitted to any other academic institution or non-academic institution for any degree or qualification.

I hereby acknowledge that I have been supplied with the Academic Rules and Regulations for Post Graduate, Universiti Teknologi MARA, regulating the conduct of my study and research.

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ABSTRACT

AIM: To identify the clinical profile of chronic hepatitis C patients treated with pegylated interferon plus ribavirin in Selayang Hospital from year 2004-2012. It is also to determine factors associated with treatment response. METHODS: 273 patients treated with pegylated interferon plus ribavirin for CHC were identified. Patient's data were accessed retrospectively through electronic medical records. Descriptive data were analysed using frequency and percentage. Simple logistic regression was used for univariate analyses. Factors with significant *p* value were analysed using multiple logistic regression. RESULTS: The mean age of patients treated was 44.16 (± 10.51). More men were treated compared to women (76.6% vs. 23.4%). Major ethnicity distribution was Chinese 48.7%, and Malays 38.5%. Majority of patients have very high baseline viral load (median >800,000 iu/ml). Genotype 3a predominates (58.2%), while genotype 1 come a close second (1a= 20.1% and 1b=12.5%). Fifty nine percent of all treated population achieved SVR. DISCUSSIONS: Twelve factors were identified as possible SVR predictors; age (p=0.002), pegylated interferon dose disruption (p=0.012), ribavirin dose disruption (p=0.223), genotype 3a (p=0.239), pre-existing diabetes mellitus type 2 (p=0.042), pre-existing kidney related disease (p=0.042), history of alcohol usage (p=0.051), baseline ALT (p=0.045), baseline platelet (p=0.001), liver biopsy fibrosis score (p=0.005), fibroscan reading (p=0.149), and RVR (p=0.0001). CONCLUSION: The information elucidated from this study could facilitate local physicians decide on the population of CHC patients that should receive treatment.

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