

Treatment Naïve, Chronic HCV

Peginterferon alfa-2b + Ribavirin  
*versus*  
Interferon alfa-2b + Ribavirin

Manns MP, et. al. Lancet. 2001;358:958-65

# Peginterferon alfa-2b + Ribavirin versus Interferon alfa-2b + Ribavirin Study Design

- **Study**

- Open-label, randomized controlled trial
- 62 sites in Europe, North America, & Argentina

- **Subjects**

- N = 1530 with chronic hepatitis C
- Treatment naïve
- Genotype 1: 68%; Genotype 2 or 3: 29%; Genotype 4,5, or 6: 3%
- Serum ALT >34 IU/L for women, >43 IU/L for men

- **Regimens**

- Higher Dose Peginterferon alfa-2b: 1.5 µg/kg 1x/week + ribavirin 800 mg/day
- Lower Dose Peginterferon alfa-2b: 1.5 µg/kg 1x/week x 4 weeks then 0.5 µg/kg 1x/week + ribavirin 1000-1200 mg/day\*
- Standard interferon alfa-2b: 3 million U 3x/week + ribavirin 1000-1200 mg/day\*

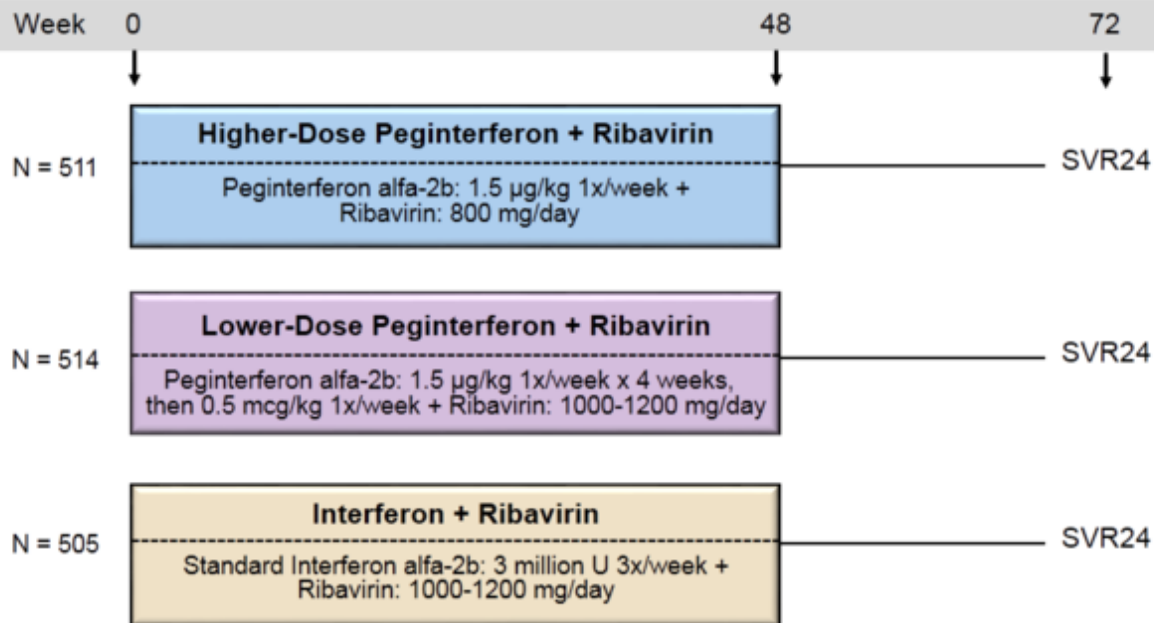
- **Primary Endpoint (Sustained Virologic Response [SVR])**

- SVR = Undetectable serum HCV RNA 24 weeks after 48-week treatments

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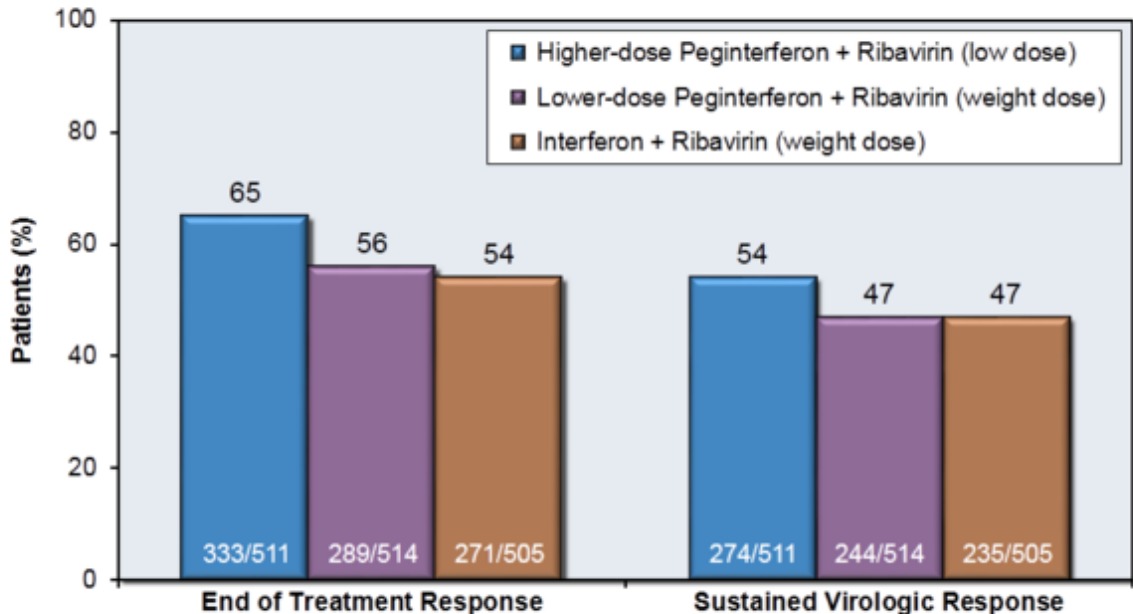
\*Ribavirin dosing: <75 kg: 1000 mg/day; ≥75 kg: 1200 mg/day

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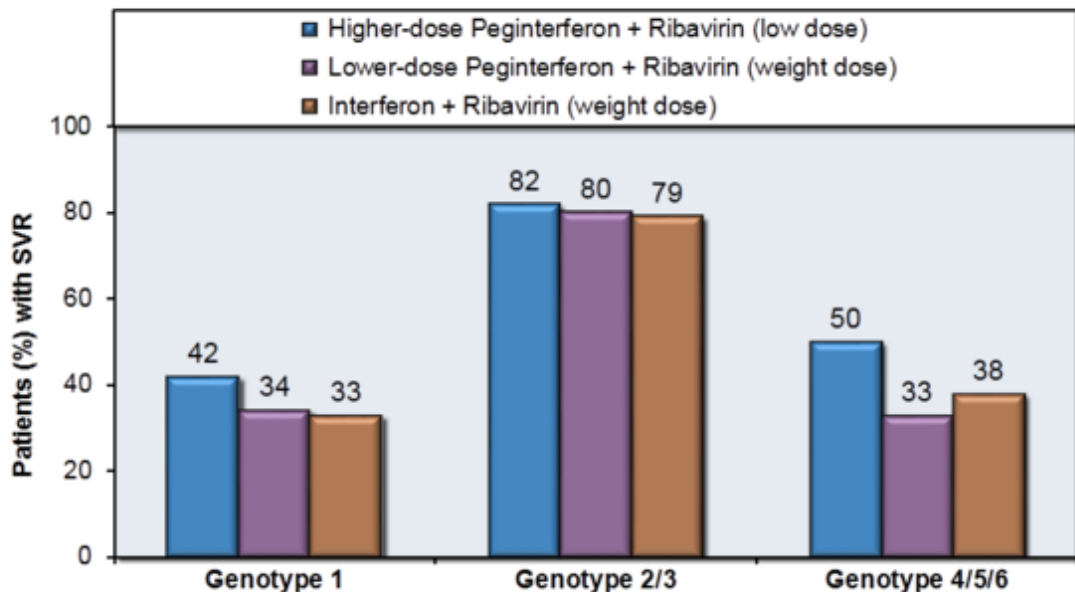
# Peginterferon alfa-2b + Ribavirin versus Interferon alfa-2b + Ribavirin Results

## Response after 48 Weeks of Treatment



# Peginterferon alfa-2b + Ribavirin versus Interferon alfa-2b + Ribavirin Results

## SVR24, Based on Genotype



## Peginterferon alfa-2b + Ribavirin versus Interferon alfa-2b + Ribavirin IDEAL Study: Conclusions

**Interpretation:** “In patients with chronic hepatitis C, the most effective therapy is the combination of peginterferon alfa-2b 1.5 µg/kg per week plus ribavirin. The benefit is mostly achieved in patients with HCV genotype 1 infections.”

This slide deck is from the University of Washington's *Hepatitis C Online* and *Hepatitis Web Study* projects.

Hepatitis C Online

[www.hepatitisc.uw.edu](http://www.hepatitisc.uw.edu)

Hepatitis Web Study

<http://depts.washington.edu/hepstudy/>

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