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Study finds safer, more efficient medication for hepatitis B treatment

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Patients with hepatitis B who did not respond to lamivudine therapy had a better virological response after switching to entecavir for a year. Continuing the drug for an additional year led to even more clinical improvement without significant side effects, according to a new study in the July issue of *Hepatology*.

Chronic hepatitis B is the tenth leading cause of death worldwide. Infected patients are at high risk of developing serious liver diseases such as cirrhosis and liver cancer, especially if they have high levels of HBV DNA in their blood. Lamivudine is one treatment for HBV, however the virus commonly becomes resistant to it and leads to disease progression. Adefovir dipivoxil is another treatment option, however virologic suppression is not optimal. A third drug, Entecavir, has been shown to be a safe and effective treatment for patients who don't respond to lamivudine.

Researchers led by Morris Sherman of Toronto General Hospital, studied 286 patients taking part in a double-blind, double-dummy, randomized, controlled trial comparing the safety and efficacy of entecavir (1 mg/day) to lamivudine (100 mg/day). The results of the first year of this trial were previously reported. 57 percent of patients taking entecavir, compared to five percent of those taking lamivudine were classified as virologic responders, and were offered continued therapy for an additional year. The researchers then assessed the efficacy, safety and resistance profile of entecavir through 96 weeks of treatment.

"The year-two results demonstrated that patients continue to experience clinical benefit with entecavir therapy beyond one year, while the safety profile remained stable," the authors report. The additional year of treatment increased the proportion of patients with HBV DNA