

Treatment for chronic hepatitis C: A phase II study

January 15 2010

The current standard treatment for chronic hepatitis C with pegylated-interferon (PEG-IFN) and ribavirin is effective in approximately 50%-60% of patients, so that a substantial proportion of patients remain unresponsive. A rational approach to develop alternative therapeutic strategies for patients with chronic hepatitis C virus (HCV) infection demands a detailed knowledge of how the different drugs affect viral kinetics and IFN intracellular signaling. Non-steroidal antiinflammatory drugs (NSAIDs) have been demonstrated to amplify the IFN signaling pathways and to enhance the anti-viral effect of IFN.

Based on previous data, a research team from Italy evaluated the safety of adding ketoprofen to pegylated-interferon (PEG-IFN) with or without ribavirin and the effect on viral kinetics, signal transducer and activator of transcription 1 (STAT1) activity and expression of 2'-5'-oligoadenylate synthetase (2'-5'OAS) in [genotype 1 chronic hepatitis C](#) in a phase II study. Their study will be published on December 21, 2009 in the *World Journal of Gastroenterology*.

Their research found that the addition of ketoprofen to the conventional combination therapy is associated with better viral kinetics and early activation of the IFN [signaling pathway](#), thus improving virological response rates. The authors postulated that a larger trial should be done with this three-drug combination, compared to the standard of care.

More information: Gramenzi A, Cursaro C, Margotti M, Balsano C, Spaziani A, Anticoli S, Loggi E, Salerno M, Galli S, Furlini G, Bernardi

M, Andreone P. Ketoprofen, peginterferon 2a and ribavirin for genotype 1 chronic hepatitis C: A phase II study. World J Gastroenterol 2009; 15(47): 5946-5952 www.wjgnet.com/1007-9327/15/5946.asp

Provided by World Journal of Gastroenterology

Citation: Treatment for chronic hepatitis C: A phase II study (2010, January 15) retrieved 3 May 2024 from <https://medicalxpress.com/news/2010-01-treatment-chronic-hepatitis-phase-ii.html>

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