

Clinical efficacy of Entecavir therapy

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Background/Aims: The aim of this study was to characterize the treatment response to entecavir and to examine the factors affecting that response. **Methods:** A total of 77 naïve chronic hepatitis B patients treated with entecavir (0.5 mg daily) for at least 48 weeks were consecutively enrolled from March 2007 to May 2011. The virologic response (HBV DNA <2,000 copies/mL), biochemical response (ALT ≤ upper limit of normal), HBeAg loss and seroconversion were retrospectively analyzed. **Results:** The cumulative rates at 12, 24, 48, 96 and 144 weeks were 51.9%, 74%, 84.4%, 94.8% and 98.3%, respectively, for the virologic response; 51.9%, 74%, 84.4%, 94.8% and 98.3% for the biochemical response; 57.1%, 63.6%, 70.1%, 74% and 80.5% for HBeAg loss; and 55.8%, 58.3%, 61%, 62.3% and 68.1% for HBeAg seroconversion. The independent predictors associated with HBV DNA PCR negativity were an absence of HBeAg at baseline and early virologic response (HBV DNA <2,000 copies/mL after 12 weeks of therapy, $p=0.001$) in a multivariate analysis. The independent factor predicting HBeAg loss was found to be early virologic response ($p=0.000$) in a multivariate analysis. **Conclusion:** Entecavir induced excellent biochemical and virologic responses in naïve chronic hepatitis B patients. Early virologic response was an independent factor for predicting HBV PCR negativity and HBeAg loss, early virologic response would be useful as a predictor of long-term treatment response of entecavir.

Grave's 병 환자에서 발생한 심한 임상 경과를 보인 E형 간염 1예

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ABSTRACT Hepatitis E (HEV) is an enterically-transmitted acute viral hepatitis which is caused by infection with hepatitis E virus. The illness often resembles that associated with other hepatotropic viruses and is usually self-limiting; in some cases, the disease progresses to acute liver failure. The infection is particularly severe in pregnant women. Patients with chronic liver disease and superimposed HEV infection can present with severe liver injury, the so-called acute-on-chronic liver failure. Chronic hepatitis E has been reported among immunosuppressed persons, in particular solid organ transplant recipients. We report here atypical clinical presentation of HEV case with extremely high liver enzyme in Grave's disease.