

Editorial**Hepatitis “C” in Pakistan and its Treatment Facilities****Dr. Azhar Masud Bhatti**A. Director Health Services, EPI Punjab, Lahore
&
Editor in Chief

In the previous days, it was discussed in the Senate of Pakistan that around 8.8 million people in Pakistan are suffering from deadly hepatitis C while another 5.6 million are affected by hepatitis B.

In a written reply to this, Minister for Health said the figures have been compiled by a recent seroprevalence study conducted by Pakistan Medical Research Council, “The quantum of hepatitis C and B are 4.9 percent and 2.5 percent respectively, “the minister added.

He said the availability of diagnostic facilities and awareness campaigns have un-earthed the hidden burden of the disease.

The Prime Minister Programme for Prevention and Control of Hepatitis was launched in August 2005 with a total cost of Rs.2.594 billion for a period of five years. The number of patients with the disease since then have increased manifold as the government started to provide free treatment, though on a limited scale.

When the programme was launched in 2005-06, the number of patients, most of them poor, who were registered and treated at government hospitals were 10,815 and 1,000 for hepatitis C and B respectively

For the year 2008-09 the figure is 84,773 and 7,204 respectively for the two categories of the disease. Free treatment is restricted only to the poor patients through financial support provided by Pakistan Bait-ul-Mal and Zakat and Ushr departments.

The Race

The race among all pharmaceutical companies to beat one another out in finding a vaccine or a lasting cure for this disease continues till to date.

Recently a team of medical researchers, while trying to get to the bottom of the rapid spread of hepatitis C all over the world, came across a strange discovery. They found striking similarity between the symptoms experienced by the hepatitis C patients and the side-effects of the antibiotics. They dug out a strong link between the extensive usage of antibiotics and the spread of hepatitis C.

They also observed that patients with a history of constant use of antibiotics for a long time are more prone to develop the chronic form of the disease.

Antibiotics are drugs used to treat infections caused mainly by bacteria. Even when properly administered,

antibiotics weaken the immune system by altering the body’s natural bacterial balance.

The first antibiotics were prescribed in the late 1930s. They were hailed as the magic bullet that would put an end to the threat of infectious diseases. In 1969 the U.S. Surgeon General said. “The war against infectious diseases has been won. “This impression was, however, proved erroneous as in the last few decades we faced an alarming increase in cases of bacterial infections that do not respond to antibiotics. This is because bacteria acquire resistance to antibiotics, so there is a continuous search for new and effective antibacterial agents.

The hepatitis C virus is spread by contact with an infected person’s blood. But not all who get the infected blood develop chronic hepatitis. Most of the young, healthy and strong, successfully resist the virus. This means that a weak defence mechanism along with other factors contributes to the development of the chronic form of this disease.

People are now gradually becoming aware of the dangerous side-effects of the antibiotics.

Only those who have a strong defence mechanism are, by the grace of Allah, safe from hepatitis C in the real sense.

The Cure

A new treatment for hepatitis C could soon be on the market if the Food and Drug Administration takes the advice of an advisory committee.

The committee unanimously approved the first of two new drugs to treat chronic hepatitis C genotype-1 infection. Hepatitis C is a chronic viral disease that causes inflammation and swelling of the liver.

The drug, Boceprevir, is a new class of protease inhibitor and would be used in combination with ribavirin and peginterferon – the current standard of care, Boceprevir prevents the virus from replicating, and studies show the three-drug cocktail is more effective than the two drug regimen. In the study, about 66 percent patients that hadn’t been treated or did not respond well to current treatment responded well to Boceprevir. The FDA’s outside panel of experts considered the risks and benefits of the drug and determined the benefits far outweigh the risks.

“The benefit for the people who do achieve sustained virologic response is fantastic, “said Dr. Elizabeth Connick, University of Colorado Denver. “This is a

miraculous advance.” “The risks are not trivial, but we do know how to manage these risks. Still, there is a lot to learn about using these drugs appropriately,” said Dr. Thomas Giordano of Baylor College of Medicine. “This is going to be a real game changer for our hepatitis C practices,” said Dr. Barbara McGovern, Tufts University School of Medicine. “I can’t wait to get back and talk to my patients about it.”

Even hard-to-treat patients like African Americans, and people with HIV and diabetes responded extremely well to the Boceprevir combination therapy. Dr. Nizar Zein, section head of hepatology at the Cleveland Clinic says the disease is of epidemic proportions and quite costly. Zein says the new medication will usher in a very important new era for treating the disease. “We can now say for the first time that we can cure hepatitis C,” Zein said. “We are talking about complete cure, cure for life. Several studies have shown that once you achieve that endpoint, the sustained virological response, you will not get hepatitis C ever again and the risk of getting cirrhosis, needing liver transplant will go down substantially.”

But this is a powerful drug and a major concern is that drug resistance can develop in patients very quickly if the medication is not taken properly. The proposed dosage is 800 mg three times a day with food. Treatment can be individualized but Zein says both doctors and patients need to be educated and clear about when and how this drug is to be taken. “If used inappropriately, the virus will rapidly develop resistance to these medications – rapidly, I mean 24 to 48 hours.”

Close attention was paid to the drug’s side effects. The most common, included anemia, abnormally low white blood cell count, fatigue, nausea, headache, hair loss and an impaired sense of taste.

According to FDA’s Dr. Poonam Mishra, the most notable safety concern is the additional decrease in hemoglobin the protein in red blood cells that carries oxygen. Hemoglobin levels lower than normal could mean anemia, bleeding or a number of other conditions.