

DID YOU KNOW? HEPATITIS C



GENERAL FACTS

- Hepatitis C virus (HCV) is the most common chronic blood-borne infection in the United States.¹
- Approximately 170 million² people worldwide are chronically infected with HCV compared to approximately 40.3 million³ people worldwide infected with HIV.
- Chronic HCV is characterized by inflammation of the liver, causing progressive liver damage that can lead to cirrhosis, hepatocellular carcinoma (HCC, or liver cancer), liver failure and death.²
- Evidence of liver disease typically appears 10-40 years after the initial infection.^{1,4}
- HCV-caused liver failure is the most common indication for liver transplantation in the U.S.⁵
- Liver cancer is the 5th most common cancer in the world.⁶
- In untreated chronic HCV patients, by the year 2020 it is estimated that in the United States⁷:
 - > The incidence of cirrhosis will double from 16% to 32% if they fail to receive or respond to therapy.
 - > Complications from cirrhosis such as hepatocellular carcinoma will increase by approximately 80%.
 - > Liver-related deaths will increase 180%.

TRANSMISSION²

- Needle-sharing among injecting drug users
- Blood products or transplant organs not adequately screened for HCV infection
- Long-term dialysis
- Unprotected sex with multiple partners
- Birth from an infected mother
- Re-use of inadequately sterilized needles, syringes or other medical equipment
- Re-use of equipment for piercing, circumcision or tattooing
- Needle stick injuries sustained by healthcare workers

CURRENT TREATMENT OPTIONS

- Current approved treatments in the United States include interferon and pegylated interferon administered by injection alone or in combination with ribavirin⁵
- The overall response rate for pegylated interferon alone is reported in the range of 23%⁸ – 39%.⁹
- Among patients infected with HCV genotype 1 (the most prevalent and most treatment-resistant genotype in the United States) who complete treatment with pegylated interferon plus ribavirin, 42%-46%^{10,11} achieve a sustained viral response (SVR).
- Approximately 80% of patients infected with the genotype 2 or 3 strain of HCV who complete treatment, achieve a SVR with a combination pegylated interferon plus ribavirin regimen.^{10,11}
- Approximately 14% of patients discontinue or reduce the dose of the combination of pegylated interferon and ribavirin as a result of treatment-related side effects,¹¹ which may include flu-like symptoms, fever, chills, headaches, muscle or joint aches, tiredness and weakness.

HEPATITIS C: THE NUMBERS

WORLDWIDE

170 million	Chronically infected ²
3-4 million	Newly infected each year ²
60%	Chronically infected are genotype 1 ¹²
70%	Asymptomatic ²
20,000	Have undergone liver transplantation for complications of chronic HCV ¹³

UNITED STATES

2.7 million	Chronically infected ⁵
8-10,000	Deaths due to complications from chronic hepatitis C per year ⁷
40-60%	Of chronic liver disease is due to hepatitis C ¹ Chronic liver disease is the 10th leading cause of death among adults ¹

DISEASE PROGRESSION

80%	Of HCV patients worldwide develop chronic infection ²
10-20%	Of chronic HCV patients worldwide develop cirrhosis ²
1-5%	Of chronic HCV patients worldwide develop liver cancer within 20-30 years ²

¹Center for Disease Control National Hepatitis C Prevention Strategy, ²World Health Organization. Fact Sheet accessed online at <http://www.who.int/mediacentre/factsheets/fs164/en/print.html>, ³UNAIDS and the World Health Organization. AIDS Epidemic Update December 2005, ⁴Infectious Disease Study #1. Hepatitis C Virus. Decision Resources December 2005, ⁵CDC: Hepatitis C Fact Sheet accessed online at <http://www.cdc.gov/ncidod/diseases/hepatitis/c/fact.htm>, ⁶Lavanchy, D. Hepatitis B Virus Epidemiology, Disease Burden, Treatment, and Current and Emerging Prevention and Control Measures. Journal of Viral Hepatitis March 2004, ⁷Davis, G. et al., Projecting Future Complications of Chronic Hepatitis C in the United States. Liver Transplantation, April 2003, ⁸Lindsay et al., A Randomized, Double-Blind Trial Comparing Pegylated Interferon Alfa-2b to Interferon Alfa-2b as Initial Treatment for Chronic Hepatitis C. Hepatology 2001, ⁹Zeuzem, S. et al., Peginterferon Alfa-2a in Patients with Chronic Hepatitis C. New England Journal of Medicine 2000, ¹⁰Fried, M. et al., Peginterferon Alfa-2a Plus Ribavirin for Chronic Hepatitis C Virus Infection. New England Journal of Medicine 2002, ¹¹Manns, M. Peginterferon Alfa-2b Plus Ribavirin Compared with Interferon Alfa-2b Plus Ribavirin for Initial Treatment of Chronic Hepatitis C: A Randomized Trial. The Lancet, September 2001, ¹²WHO Hepatitis C Guide accessed online at <http://www.who.int/en/>, ¹³Biggins, SW, Terrault, NA. Treatment of Recurrent Hepatitis C After Liver Transplantation. Clinical Liver Disease. 2005 Aug;9(3):505-23



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