Looking for Liver Helpers

April 1, 2004 By Bob Roehr

About 40 percent of HIVers are coinfected with hep C, and so far, interferon's the only hepatitis C (HCV) treatment. It "trains" the immune system to respond to the virus—and can deliver some sickening side effects. HCVers and docs hope treatment can get shorter and easier to tolerate with the addition of new meds such as these early-development dandies:

Two HCV Protease Inhibitors

>> BILN 2061. In early trials, people with genotype 1 virus (most common in the U.S.) seem to respond well to this drug.

>> VX-950. Still in the lab, it looks stronger and less vulnerable to resistance than BILN. Human trials start early this year.

Reality check: "A lot of the PIs bomb" in more advanced trials, says New York City liver pro Douglas Dieterich, MD, who cautions that interferon plus ribavirin may remain the standard for at least another decade.

Just a spoonful of Albuferon makes the interferon stick around:

>> While awaiting PIs: **Albuferon** fuses human albumin (think egg whites) onto interferon to keep your body from filtering out the drug. Dieterich hopes Albuferon can steady the body's drug level, allowing for less drug and fewer side effects and letting HCVers get a shot every two to four weeks (vs. once-a-week Pegasys and Peg-Intron).

In early Phase I/II trials, HCVers who didn't respond to pegylated interferon saw encouraging declines in HCV viral load on Albuferon. Next step: finding the best dose for a full Phase III trial this year.

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