

Title

RISK FACTORS FOR ANAEMIA DEVELOPMENT DURING THERAPY WITH RIBAVIRIN PLUS DIRECT-ACTING ANTIVIRALS CP-019

Name **E. Molina¹, P. Nieto¹, S. Cañizares¹, B. Franco¹, B. Tauste¹, F. Sierra¹.**

Address **¹Hospital Torrecárdenas, Hospital Pharmacy, Hermandad de los Donantes de Sangre s/n Almería, Spain. PC 04009**

Background

Anemia is a common adverse event associated with ribavirin therapy of hepatitis C patients. Peginterferon/ribavirin was the cornerstone of the treatment of hepatitis C (HCV) patients until 2011

Purpose

To assess the incidence of anemia and the risk factors predictive of anemia in the new context of ribavirin plus new direct-acting antiviral (DAA) agents

Study Design

A one-year retrospective study was performed during a year. Anemia was defined as a single occurrence of hemoglobin <10g/dL at any point during treatment. Serum hemoglobin assessments were obtained at baseline and weeks 0, 4, 8, 12, 16, 20, and 24. Pre-treatment factor with potential to act as prognostic indicators of anemia including age, sex, type of treatment, genotype, FibroScan® score, cirrhotic yes/no, HCV RNA titer, dose 1000mg/1200mg, Glomerular filtration rate, alanine transaminase, albumin, treatment duration 12 vs >12 weeks and baseline hemoglobin and on-treatment factor as week 2 change from baseline were analysed by univariate and multivariate logistic regression analyses. For the resulting independent predictive factor, odds-ratio and 95% confidence intervals were calculated.

RESULTS

Table 1: Baseline characteristics of patients included in the study.

Mean age ± SD (years)	54.75 ± 8.6
Male patients n (%)	119 (78.30)
FibroScan® score ± SD (kPa)	17.80 ± 9.99
Grade of fibrosis n (%)	
- F1 (minimal fibrosis)	5 (3.3)
- F2 (fibrosis within the liver and blood vessels)	17 (11.2)
- F3 (fibrosis spreading to other liver areas)	35 (23)
- Cirrhotic patients: F4 (cirrhosis or advanced liver fibrosis)	95 (62.5%)
eGFR (CKD-EPI) ± SD (mL/min)	98 ± 16.81
Viral load = SD x10 ⁶ RNA copies/mL	2.79 ± 3.5
Platelet count ± SD x10 ⁹ /cells/μL	157.99 ± 83.77
Albumin ± SD (g/dL)	4.11 ± 0.59
ALT ± SD (U/L)	83.11 ± 52.08
Patients with weight >75kg (%)	73 (48)
Naïve patients (%)	86 (56.6)
Treatment duration n (%)	
- 12 weeks	128 (84.2)
- >12 weeks	24 (15.8)
Baseline Hb ± SD (g/dL)	14.93 ± 1.62
HCV genotype n (%)	
- 1	102 (67.1)
- 2	5 (3.3)
- 3	24 (15.8)
- 4	21 (13.8)
- 5	59 (38.8)
Drug combination n (%)	
- Sofosbuvir-Ledipasvir	102 (67.1)
- Ombitasvir-Paritaprevir-Ritonavir-Dasabuvir	24 (15.8)
- Sofosbuvir-Simeprevir	31 (20.4)
- Sofosbuvir-Chikitaevir	17 (11.2)
- Sofosbuvir	18 (11.8)
- Sofosbuvir-Peginterferon	5 (3.3)
- Ombitasvir-Paritaprevir-Ritonavir	10 (6.6)
- Simeprevir-Peginterferon	3 (2)
- Chikitaevir	9 (5.9)

Abbreviations: ALT: Alanine Aminotransferase; eGFR: CKD-EPI Estimated Glomerular Filtration Rate (Chronic Kidney Disease Epidemiology Collaboration); Hb: Hemoglobin; HCV: hepatitis C virus; SD: standard deviation; RBV: Ribavirin.

Table 2: Compared baseline characteristics.

Parameter	Patients with Hb<10g/dL (n=129)	Patients with Hb≥10g/dL (n=23)	p-value
Mean age ± SD (years)	53.75 ± 7.64	60.22 ± 11.44	ps0.001*
Gender male n (%)	107 (82.90)	12 (52.2)	ps0.01*
FibroScan® score ± SD (kPa)	17.20 ± 17.2	19.88 ± 19.89	ns†
Cirrhotic patients n (%)	78 (60.05)	17 (73.9)	ns†
eGFR ± SD (mL/min)	99.92 ± 11.03	73.05 ± 24.33	ps0.001*
Viral load ± SD x10 ⁶ (copies/mL)	2.87 ± 3.7	2.32 ± 2.46	ns†
Platelet count ± SD x10 ⁹ (cells/μL)	164.64 ± 86.1	129 ± 57.57	ps0.05*
Albumin ± SD (g/dL)	4.16 ± 0.47	3.85 ± 0.59	ps0.01*
ALT ± SD (U/L)	83.48 ± 52.7	81.04 ± 49.52	ns†
Patients with weight >75kg (%)	66 (51.20)	7 (30.4)	ns†
Naïve patients n (%)	73 (56.6)	13 (56.5)	ns†
Treatment duration >12weeks n (%)	16 (20.40)	8 (34.8)	ps0.05*
Baseline Hb ± SD (g/dL)	15.29 ± 1.33	12.88 ± 1.45	ps0.001*

* Student's t-test; † χ² test; ‡ Mann-Whitney's U test.
Abbreviations: ALT: Alanine Aminotransferase; eGFR: Estimated glomerular filtration rate (Chronic Kidney Disease Epidemiology Collaboration); HCV: hepatitis C virus; ns: non-significant; SD: standard deviation.

Fig. 1 Time to development of anemia (Hb<10g/dL)

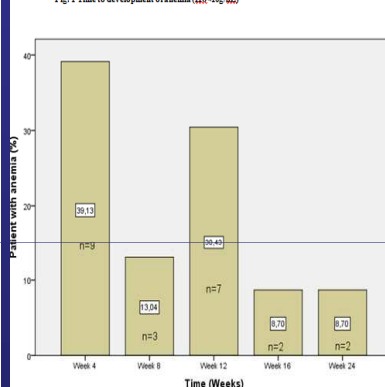


Fig. 2 Change in hemoglobin concentration during the treatment.

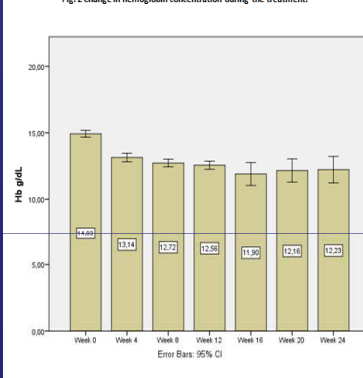


Fig. 3 Comparable change in hemoglobin concentrations (g/dL) from start of treatment to week 12.

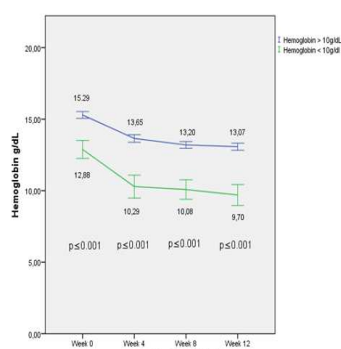
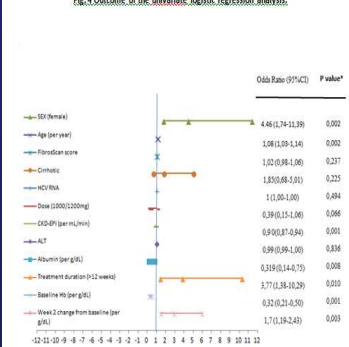


Fig. 4 Outcome of the univariate logistic regression analysis.



g: Chi-square test.
Abbreviations: ALT: Alanine Aminotransferase; CI: Confidence interval; eGFR: CKD-EPI Estimated Glomerular Filtration Rate by the Chronic Kidney Disease Epidemiology Collaboration; HCV: hepatitis C virus.

Table 3: Results of Multiple Logistic Regression Analysis (Ribavirin-Induced Anemia).

Parameter	Initial multivariate model		Final pre-treatment multivariate model		Final on-treatment multivariate model	
	BC	P-value	OR (CI 95%)	R.C.	P-value	OR (CI 95%)
Age (per year)	-0.11	0.168	0.89 (0.78-1.03)			
Sex (female)	-0.22	0.629	0.59 (0.07-4.80)			
CKD-EPI (per mL/min)	-0.14	0.065	0.86 (0.78-0.96)	0.001	0.91 (0.86-0.96)	0.001
Albumin (per g/dL)	0.02	0.882	1.02 (0.93-1.12)			
Treatment duration (>12 weeks)	2.78	0.002	16.10 (1.49-173.39)	0.001	7.43 (1.31-41.37)	0.013
Baseline Hb (per g/dL)	-2.58	0.002	0.07 (0.01-0.30)	0.001	0.40 (0.24-0.65)	0.001
Week 2 change from baseline (per g/dL)	4.90	0.001	139.93 (6.54-2823.70)	0.001	4.50 (1.76-1418.30)	0.001
Dose (1000/1200mg)	0.47	0.711	1.61 (0.13-19.80)			

* Wald Chi-square test; Abbreviations: CI: Confidence interval; OR: Odds ratio; R.C.: Regression coefficient.

Table 4A Pre-treatment mathematical formula as a prognostic indicator of anemia

Predicted ANEMIA	Observed ANEMIA		Total	PPV	NPV
	YES	NO			
YES	13	2	15	86.60	-
NO	10	127	137	-	92.70
Total	23	129	152		

4B On-treatment mathematical formula as a prognostic indicator of anemia

Predicted ANEMIA	Observed ANEMIA		Total	PPV	NPV
	YES	NO			
YES	19	1	20	95.00	-
NO	4	128	132	-	96.96
Total	23	129	152		

Abbreviations: PPV, Positive predictive value; NPV, Negative predictive value.

CONCLUSION

The incidence of anemia with DAA has been less than with peginterferon combinations. Glomerular filtration rate, baseline hemoglobin, treatment duration > 12 weeks and estimated week 2 change from baseline have demonstrated predicting the risk of anemia.

There is not any conflict of interest at all.

✓Acknowledgements

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