



## AIDP associated with interferon $\alpha$ 2b treatment of chronic HCV infection-case report

### KEYWORDS

Acute inflammatory demyelinating polyradiculopathy, HCV, Genotype, Interferon

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**ABSTRACT** Interferon  $\alpha$ 2b or  $\alpha$ 2a plus Ribavirin is the standard treatment for all varieties of HCV related liver diseases. Duration of treatment varies depending upon the type of genotype and stage of liver disease. Patients on interferon treatment should be closely monitored with periodic clinical and laboratory evaluations. The side effects usually resolve after stopping treatment.

### Introduction

HCV causes both acute and chronic liver diseases. Persons with chronic infection carry 15-30% risk of cirrhosis of liver within 20 years. Some of these patients tend to develop Hepatocellular carcinoma. The aim of the treatment is to arrest the progression to Hepatocellular carcinoma. The immune response of the host sometimes clear the virus, when it can not, treatment is initiated to achieve positive cure. The cure rate depends on several factors including the genotype of the virus, stage of the disease and type of interferon given. The current recommended treatment for Hepatitis C infection is combination of Interferon  $\alpha$  2a or 2b and Ribavirin, which are effective against all genotypes of HCV viruses.

### Case history

53 year male was incidentally detected as HCV positive. His laboratory tests, Complete blood picture, Liver function tests were normal. Ultrasound examination of abdomen showed normal liver architecture. Gastroscopy findings were normal. His Quantitative estimation of HCV RNA was 234000iu/ml and the genotype was 3.

He was started on weekly pegylated interferon  $\alpha$  2b and daily Ribavirin<sup>1</sup> and after 12 weeks of treatment his HCV RNA quantity was less 15 iu/ml. At the end of 16 weeks of treatment he developed sudden onset of weakness in both lower limbs. The patient was referred to neurophysician. The neurophysician after clinical examination asked for nerve conduction study and EMG. The findings of these tests suggestive of Demyelinating motor sensory axonal radiculoneuropathy. He was given intravenous immunoglobulins and made good recovery.

### Discussion

The interferon  $\alpha$ 2b plus Ribavirin is the standard treatment protocol<sup>2</sup> for chronic HCV related liver disease. Several side effects have been associated with interferon 2b treatment and neurological complications are seen rarely. The AIDP incidence in normal population is 1 in 100000. It is due to autoimmune mechanisms and 50% of ADP occur following viral illness. EMG study documented that impulses could not activate muscles and Nerve conduction study showed the time taken by nerve to respond to a signal is delayed. Treatment of AIDP include Plasma exchange, intravenous immunoglobulins and some require ventilator support.

### Conclusion

Patients on interferon  $\alpha$ 2b should be closely monitored for possible complications<sup>3</sup> and the drug should be stopped as soon as the side effects.

### REFERENCE

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