Su1016 Continuous Entecavir for Treatment-Naive Chinese Chronic Hepatitis B in the Real World Setting: The Six-Year Results

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BACKGROUND: There is a paucity of data on uninterrupted entecavir for treatment-naive chronic hepatitis B (CHB) beyond 5 years. METHODS: Treatment-naive Chinese CHB patients were treated continuously with entecavir 0.5mg daily in the real world setting for up to 6 years. The cumulative rates of hepatitis B e antigen (HBeAg) seroconversion, alanine aminotransferase (ALT) normalization, DNA undetectability, virologic breakthrough (>1 log HBV DNA increase from the nadir) and genotypic resistance to entecavir were determined. HBV DNA levels were measured by Roche Taqman real time PCR assay (lower limit of detection: 20 IU/mL). Resistance profile was determined by line probe assay (LiPA, Innogenetics NV, Gent, Belgium) for patients with detectable HBV DNA. RESULTS: 222 Chinese CHB patients (median age 45 years, 70.7% male) were recruited. 222, 188, 173, 170, 164 and 155 patients were followed up for 1, 2, 3, 4, 5 and 6 years respectively. The cumulative rate of HBV DNA undetectability up to year 6, determined by the Kaplan-Meier method, was 98.7%. Among patients with follow-up beyond two years, 30 (17.3%) had partial virologic response, defined as detectable HBV DNA at year 1, of which 27 (90%) subsequently developed persistent HBV DNA undetectability. The cumulative rate of ALT normalization up to year 6 was 95.0%. 90 patients (40.5%) were HBeAg-positive at baseline, and the cumulative HBeAg seroconversion rate up to year 6 was 76.1%. 2 patients developed HBsAg seroclearance at years 2 and 6 respectively; the cumulative rate of HBsAg seroclearance up to year 6 was 1.2%. The cumulative rate of virologic breakthrough was 6.3% (n=6). 2 patients developed entecavir signature mutations at year 3 (rt180M/rt204V/rt184S/C/G/A) and 4 (rt180M/rt204V/rt184I/F/M) respectively. The cumulative rate of entecavir resistance up to year 6 was 1.2%. There were no serious adverse events related to entecavir. CONCLUSION: Entecavir is a potent and safe nucleoside analogue suitable for long-term use, with only very low rates of resistance. Majority of patients with partial virologic response eventually achieved successful long-term virologic suppression. 6 years of therapy only achieved a low rate of HBsAg seroclearance, indicating new agents capable of achieving strong HBsAg reduction are needed to enhance current treatment regimens for CHB.