

# AS MANY AS 2 IN 3 CHRONIC HEPATITIS C PATIENTS MAY BE CURED.\*<sup>1,2</sup>

As you may be aware there is a higher than average incidence of hepatitis C amongst the Chinese and South East Asian communities, even though actual treatment numbers remain low.

Left untreated, hepatitis C can have serious consequences including cirrhosis, hepatocellular carcinoma and liver failure.<sup>3</sup>

Clinical trials now show that as many as 2 out of 3 people living with hepatitis C may be cured with Pegasys RBV (pegylated interferon alpha-2a and ribavirin).<sup>1,2</sup>

Roche has developed a culturally specific disease awareness campaign to reach Australians with Chinese and Vietnamese heritage. It is designed to encourage people living with hepatitis C to seek advice from their GP regarding referral to a liver clinic for specialist assessment and information about treatment options.

"Understanding hepatitis C and its treatment" booklets in Chinese, Vietnamese and English are also available from Roche Products.



For more information on PEGASYS RBV call the Roche Medical Information line on 1800 233 950.

\*Sustained virological response (undetectable serum HCV RNA 24 weeks after cessation of therapy) in patients previously untreated.

PBS Information: Listed on the PBS as a Section 100 item.  
Refer to PBS Schedule for full information.

Before prescribing, please refer to TGA Approved Product Information. **ABRIDGED PRODUCT INFORMATION PEGASYS® RBV® Combination Therapy** Containing PEGASYS® (peginterferon alfa-2a) pre-filled syringe with COPEGUS® (ribavirin) tablets **INDICATIONS** For the treatment of chronic hepatitis C in patients who have received no prior interferon therapy. Patients must be ≥ 18 years and have compensated liver disease. **DOSAGE AND ADMINISTRATION** The recommended dose is PEGASYS 180 micrograms once weekly by subcutaneous injection taken with COPEGUS tablets taken twice daily with food. The COPEGUS dose varies between 800 to 1200 mg depending on patient's body weight and genotype. Dose modifications may be required if moderate to severe adverse reactions occur. **CONTRAINDICATIONS** Category X: COPEGUS must not be used in pregnant women or males whose partner is pregnant. Extreme care must be taken to avoid pregnancy. Hypersensitivity to alfa interferons, ribavirin, *E. coli*, polyethylene glycol or any product ingredient; autoimmune hepatitis; decompensated cirrhosis, patients with HIV-HCV co-infection with cirrhosis and a Child-Pugh score ≥ 6, history of cardiac disease; haemoglobinopathies; breast-feeding women and neonates or infants ≤ 3 years. **PRECAUTIONS** Monitor patients for signs of depression or suicide ideation; elevated ALT levels; hepatic decompensation; pulmonary disorders e.g. dyspnoea, pneumonia; hypothyroidism, hyperthyroidism, hypoglycaemia, hyperglycaemia or diabetes mellitus; autoimmune disease e.g. psoriasis; hypersensitivity reactions; cardiovascular disorders; renal impairment; infections; changes to blood counts, anaemia and visual disturbances. HIV-HCV co-infected patients with advanced cirrhosis receiving concomitant HAART may be at risk of hepatic decompensation or death. Do not use in children ≤ 18 years; during lactation or pregnancy (Category X). May affect the ability to drive or operate machinery. PEGASYS interacts with theophylline, methadone, zidovudine, telbivudine and Sho-saiko-to (Chinese medicine). COPEGUS interacts with antacids, didanosine and stavudine. **SIDE EFFECTS** Most commonly reported adverse reactions include nausea, diarrhoea, abdominal pain, fatigue, fever, rigors, muscle pain, joint pain, injection site reaction, asthenia, dermatitis, anorexia, dizziness, headache, insomnia, depression, irritability, anxiety, alopecia and pruritis. As with other alfa interferons, serous retinal detachment has been reported with PEGASYS and COPEGUS combination therapy. \* A clinical trial investigating the combination of telbivudine 600 mg daily, with PEGASYS 180 µg once weekly by subcutaneous administration, indicates that the combination is associated with an increased risk for developing peripheral neuropathy. The mechanism behind these events is not known. Such an increased risk cannot be excluded for other interferons (pegylated or standard). Moreover, the benefit of the combination of telbivudine with interferon alfa (pegylated or standard) is not currently established. \* Available in packs containing PEGASYS pre-filled syringes x 4 with either COPEGUS 84, 112, 140 or 168 tablets. Please review the complete Product Information before prescribing, available from the manufacturer on request. Roche Products Pty Limited ABN 70 000 132 865 4 - 10 Inman Road Dee Why NSW 2099 Date of preparation: 12 November 2008 \*Please note change(s) in Product Information. References: 1. Zeuzem S et al. *J Hepatol* 2005;43:250-257. 2. Swain MG et al. *J Hepatol* 2007;46:S3. 3. HIV, viral hepatitis and STDs - A guide for primary care. Australasian Society for HIV Medicine. 2008 Edition. ©Registered trademark. MN37525510 04/09 S&H ROCPE1821.