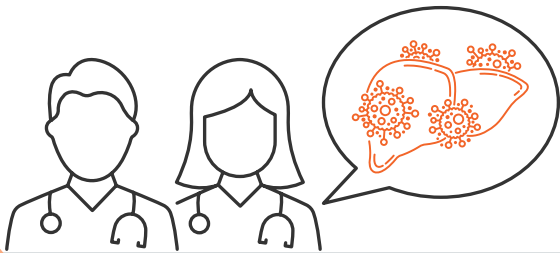


Hepatitis Delta Virus

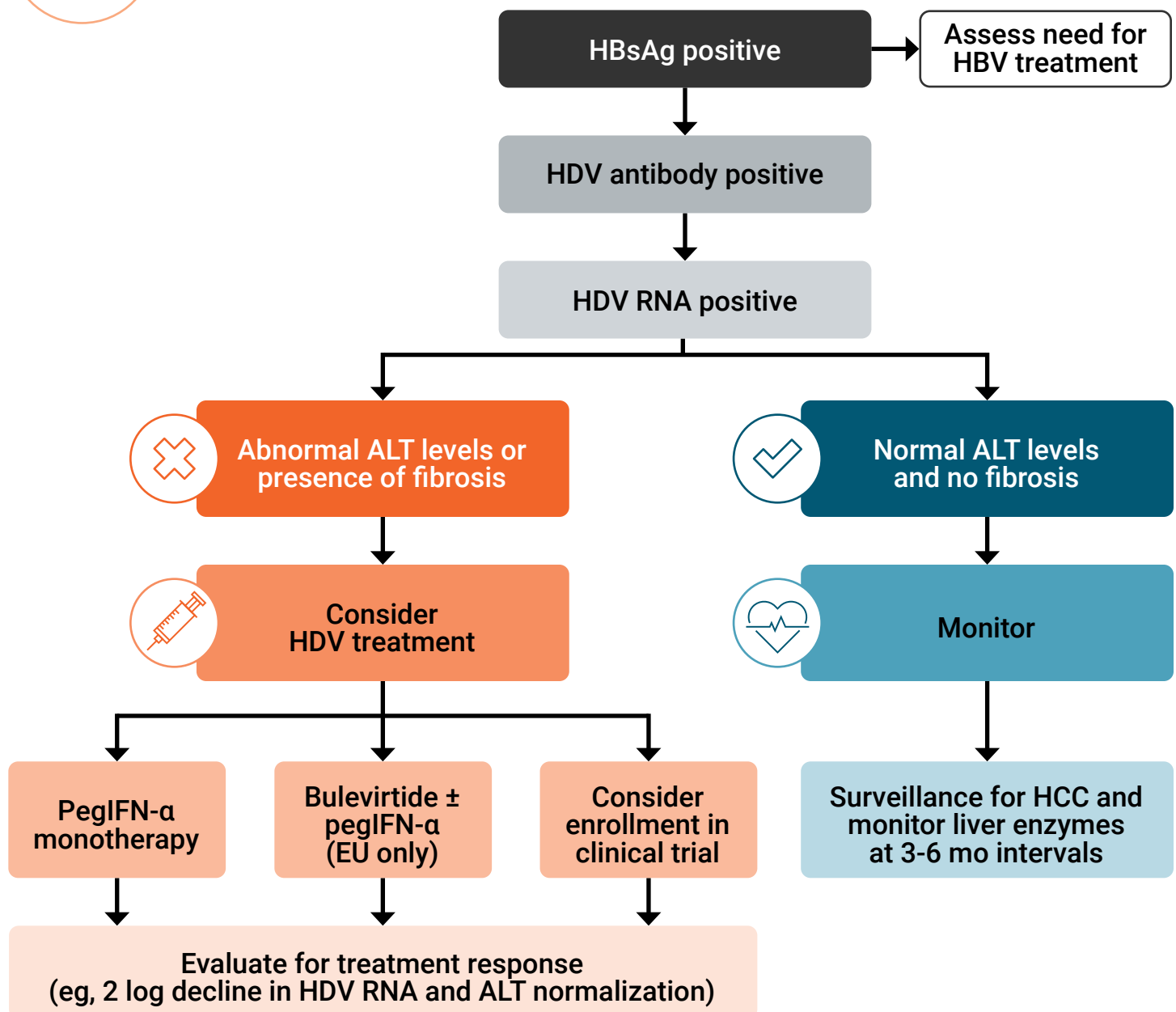
Treatment and Management



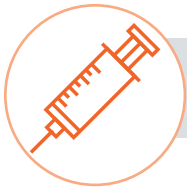
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Approach to HDV Treatment¹⁻³



ALT, alanine aminotransferase; HBsAg, hepatitis B surface antigen; HBV, hepatitis B virus; HCC, hepatocellular carcinoma; HDV, hepatitis delta virus; pegIFN, peginterferon.



PegIFN for HDV Treatment^{2,4-6}

Dosage



180 mcg/week, subcutaneous injection in the abdomen or thigh

- Mild or moderate renal impairment: no dose adjustment required
- Severe renal impairment (creatinine clearance <30 mL/min) or end-stage kidney disease requiring chronic hemodialysis: reduce dose to 135 mcg/week

Contraindications



- Decompensated cirrhosis (eg, ascites, esophageal varices, MELD >15)

Precautions for use



- Severe psychiatric disorders (eg, major depression)
- Immunocompromised conditions (eg, transplant recipient)
- Significant or unstable cardiac disease

Adverse effects



- Flulike symptoms (eg, fatigue, weight loss)
- Thrombocytopenia
- Neutropenia
- Anemia
- Psychiatric complications



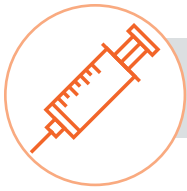
Duration
~1 year

PegIFN Dose Reduction Recommendations

Laboratory Value		Recommendations
ANC, cells mm ³	<750	Reduce to 135 mcg
	<500	Discontinue treatment until ANC values return to >1000 cells/mm ³ ; reinstitute at 90 mcg and monitor ANC
Platelet, cells mm ³	<50,000	Reduce to 90 mcg
	<25,000	Discontinue treatment

ANC, absolute neutrophil count.

Depression severity	Initial Management (4-8 Wk)		Depression Status		
	Dose Modification	Visit Schedule	Remains Stable	Improves	Worsens
Mild	No change	Evaluate once weekly by visit and/or phone	Continue weekly visit schedule	Resume normal visit schedule	(See moderate or severe depression)
Moderate	Decrease dose to 135 mcg (in some cases dose reduction to 90 mcg may be needed)	Evaluate once weekly (office visit at least every other wk)	Consider psychiatric consultation. Continue reduced dosing	If symptoms improve and are stable for 4 wk, may resume normal visit schedule. Continue reduced dosing or return to normal dose	(See severe depression)
Severe	Discontinue permanently	Obtain immediate psychiatric consultation	Psychiatric therapy necessary		



Bulevirtide for HDV Treatment (Approved in EU)^{3,7}

Dosage



2 mg/day, subcutaneous injection
in the abdomen or thigh

Adverse effects



- Headache
- Dizziness
- Nausea
- Asymptomatic increase in bile salts (no monitoring needed)
- Pruritus
- Arthralgia
- Eosinophilia
- Administration/injection-site reactions (eg, erythema, pain, rash)

Duration

optimal duration
currently unknown



Monitoring PegIFN or Bulevirtide HDV Therapy⁴

Test		Baseline	During Antiviral Therapy	After Completing Antiviral Therapy
Complete blood count		X for pegIFN	For pegIFN: consider monthly, or at 1 mo, then every 3 mo thereafter	
Liver function tests		X	Every 3 mo	At 1 and 3 mo post treatment, then every 6 mo thereafter
HDV RNA		X	Every 3 mo	At 1 and 3 mo post treatment, then every 6 mo thereafter
HBV DNA		X	Every 3 mo	Every 6 mo
Serum HBsAg quantification levels		X	Every 3 mo	

clinicaloptions.com/hepatitis/programs/2022/hepatitis-delta-in-focus



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