

ClinicalTrials.gov Protocol and Results Registration System (PRS) Receipt
Release Date: 07/30/2010

Grantor: CBER IND/IDE Number: 58,827 Serial Number: 355

A Study of PEGASYS (Peginterferon Alfa-2a (40KD)) Plus COPEGUS (Ribavirin) in Patients With Chronic Hepatitis C (CHC) Genotype 1 and Human Immunodeficiency Virus-1 (HIV-1) Co-infection

This study has been completed.

Sponsor:	Hoffmann-La Roche
Collaborators:	
Information provided by:	Hoffmann-La Roche
ClinicalTrials.gov Identifier:	NCT00353418

► Purpose

This 2-arm study will compare the efficacy and safety of treatment with Pegasys (180 µg weekly) plus Copegus (800 mg daily) and Pegasys (180 µg weekly) plus Copegus (1000-1200 mg daily) in interferon-naïve patients with CHC genotype 1 co-infected with HIV-1. Treatment will be administered for 48 weeks, and this will be followed by 24 treatment-free weeks. The anticipated time on study treatment is 3-12 months, and the target sample size is 100-500 individuals.

Condition	Intervention	Phase
Hepatitis C, Chronic	Drug: Peginterferon alfa-2a Drug: Ribavirin	Phase 4

Study Type: Interventional

Study Design: Treatment, Parallel Assignment, Double Blind (Subject, Investigator), Randomized, Safety/Efficacy Study

Official Title: A Randomized, Multicenter, Double Blinded Study Comparing the Safety and Efficacy of Pegasys® 180 ug Plus Copegus® 1000 or 1200 mg to the Currently Approved Combination of Pegasys® 180 ug Plus Copegus® 800 mg in Interferon-naïve Patients With Chronic Hepatitis C Genotype 1 Virus Infection and HIV-1

Further study details as provided by Hoffmann-La Roche:

Primary Outcome Measure:

- Sustained Virological Response (SVR) [Time Frame: Week 72] [Designated as safety issue: No]
SVR was defined by the percentage of patients with undetectable Hepatitis C virus (HCV) ribonucleic acid (RNA) at 24 weeks after completion of the 48-week treatment period (i.e., a single last HCV RNA < 20 IU/mL measured \geq Day 477 [\geq Week 68]). Patients without an HCV measurement at the end of the 24-week untreated follow-up period were considered nonresponders.
- Incidence of Adverse Events, Dose Reductions and Withdrawals Due to Anemia [Time Frame: Up to Week 72] [Designated as safety issue: Yes]
Adverse events of anemia included hemolytic anemia, aplasia pure red cell, and pancytopenia.

Secondary Outcome Measures:

- Virological Response at End of Treatment Period [Time Frame: Week 48] [Designated as safety issue: No]
Virological response at the end of the treatment period was defined as a single last HCV RNA measurement <20 IU/mL at the completion of the treatment period (Days 324 to 351). Patients without an HCV measurement at Week 48 were considered nonresponders.
- Virological Response at Weeks 4, 12 and 24 [Time Frame: Weeks 4, 12 and 24] [Designated as safety issue: No]
Virological response at Weeks 4, 12 and 24 was also defined as a single last undetectable HCV RNA (< 20 IU/mL) falling within the visit windows of Days 16 to 43, 72 to 99, and 156 to 183, respectively. Patients without an HCV measurement at a study week were considered nonresponders at that study week.
- Relapse of Virological Response [Time Frame: Weeks 48 and 72] [Designated as safety issue: No]
Relapse of virological response was calculated by dividing the number of patients who achieved a virological response at the end of treatment but had detectable HCV RNA at the last assessment posttreatment by the number of patients with a virological response at the end of treatment who had at least one HCV RNA assessment posttreatment.
- Rapid Virological Response (RVR) by Week 4 [Time Frame: Week 4] [Designated as safety issue: No]
RVR was defined as an undetectable HCV RNA < 20 IU/mL (a single last HCV RNA < 20 IU/mL falling in the time window of Days 2 to 43). Patients without an HCV measurement by Week 4 were considered nonresponders.
- Early Virological Response (EVR), Partial EVR and Complete EVR by Week 12 [Time Frame: Week 12] [Designated as safety issue: No]
EVR: Undetectable HCV RNA <20 IU/mL or ≥ 2 log₁₀ drop from pretreatment level, by Week 12 (a single last HCV RNA <20 IU/mL or ≥ 2 log₁₀ drop from pretreatment level in the time window of Days 2 to 99). Partial EVR: Detectable HCV RNA but ≥ 2 log₁₀ drop from pretreatment, by Week 12 (a single last HCV RNA detectable but ≥ 2 log₁₀ drop from pretreatment in the time window of Days 2 to 99). Complete EVR: Undetectable HCV RNA <20 IU/mL, by Week 12 (a single last HCV RNA <20 IU/mL in the time window of Days 2 to 99). Patients without an HCV measurement by Week 12 were considered nonresponders.

Enrollment: 415

Study Start Date: June 2006

Primary Completion Date: April 2009

Study Completion Date: April 2009

Arms	Assigned Interventions
Experimental: PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	Drug: Peginterferon alfa-2a 180 µg subcutaneously weekly for 48 weeks Other Names: Pegasys Drug: Ribavirin 800 mg orally daily for 48 weeks Other Names:

Arms	Assigned Interventions
	Copegus
Active Comparator: PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg	Drug: Peginterferon alfa-2a 180 µg subcutaneously weekly for 48 weeks Other Names: Pegasys Drug: Ribavirin 1000 mg or 1200 mg (based on patient weight of < 75 kg or ≥ 75 kg, respectively) orally daily for 48 weeks Other Names: Copegus

▶ Eligibility

Ages Eligible for Study: 18 Years and older
 Genders Eligible for Study: Both
 Accepts Healthy Volunteers: No

Criteria

Inclusion Criteria:

- Adult patients, ≥18 years of age
- CHC genotype 1
- Stable HIV-1 infection

Exclusion Criteria:

- Previous treatment with an alpha interferon, ribavirin, viremagine, levovirin, amantadine or investigational HCV protease or polymerase inhibitors
- Medical condition associated with liver disease other than CHC infection

▶ Contacts and Locations

Investigators

Study Director:

Clinical Trials

Hoffmann-La Roche

▶ More Information

Clinical Study Report Synopsis

<http://www.roche-trials.com/studyResultGet.action?studyResultNumber=NV18209>

Responsible Party: Hoffmann-La Roche (Disclosures Group)

Study Results

 Participant Flow

Reporting Groups

	Description
PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	
PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg	

Overall Study

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
Started	138	277
Completed	55	119
Not Completed	83	158

 Baseline Characteristics

Reporting Groups

	Description
PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	
PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg	

Baseline Measures

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg	Total
Number of Participants	138	277	415

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg	Total
Age, Customized ^[1] [units: Participants]			
< 65 years	134	273	407
>=65 years	1	2	3
Age, Continuous ^[1] [units: Years] Mean (Standard Deviation)	45.2 (8.39)	45.5 (8.16)	45.4 (8.24)
Gender, Male/Female ^[1] [units: Participants]			
Female	29	51	80
Male	106	224	330

[1] The All Patients Treated population included all patients randomized who had received at least one dose of study medication: PEG-IFN alfa 2-a 180 µg + ribavirin 800 mg = 135 patients; PEG-IFN alfa 2-a 180 µg + ribavirin 1000 or 1200 mg = 275 patients.

► Outcome Measures

1. Primary Outcome Measure:

Measure Title	Sustained Virological Response (SVR)
Measure Description	SVR was defined by the percentage of patients with undetectable Hepatitis C virus (HCV) ribonucleic acid (RNA) at 24 weeks after completion of the 48-week treatment period (i.e., a single last HCV RNA < 20 IU/mL measured ≥ Day 477 [≥ Week 68]). Patients without an HCV measurement at the end of the 24-week untreated follow-up period were considered nonresponders.
Time Frame	Week 72
Safety Issue?	No

Analysis Population Description

The All Patients Treated population included all patients randomized who had received at least one dose of study medication: PEG-IFN alfa 2-a 180 µg + ribavirin 800 mg = 135 patients; PEG-IFN alfa 2-a 180 µg + ribavirin 1000 or 1200 mg = 275 patients.

Reporting Groups

	Description
PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	

	Description
PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg	

Measured Values

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
Number of Participants Analyzed	135	275
Sustained Virological Response (SVR) [units: Percentage of participants]	19	22

Statistical Analysis 1 for Sustained Virological Response (SVR)

Statistical Analysis Overview	Comparison Groups	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg, PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
	Comments	Sample sizes of 133 and 267 patients for RBV 800 mg daily and RBV 1000 or 1200 mg daily, respectively, provided the following probabilities of detecting the specified differences in SVR with a 0.05 level two-sided chi-square test of significance: RBV 800 mg SVR - 0.30; RBV 1000 or 1200 mg SVR - 0.40; Probability - 0.49 RBV 800 mg SVR - 0.30; RBV 1000 or 1200 mg SVR - 0.45; Probability - 0.83
	Non-Inferiority or Equivalence Analysis?	No
	Comments	[Not specified]
Statistical Test of Hypothesis	P-Value	0.6119
	Comments	[Not specified]
	Method	Cochran-Mantel-Haenszel
	Comments	[Not specified]
Method of Estimation	Estimation Parameter	Odds Ratio (OR)
	Estimated Value	1.15
	Confidence Interval	(2-Sided) 95% 0.68 to 1.93
	Estimation Comments	[Not specified]

2. Primary Outcome Measure:

Measure Title	Incidence of Adverse Events, Dose Reductions and Withdrawals Due to Anemia
Measure Description	Adverse events of anemia included hemolytic anemia, aplasia pure red cell, and pancytopenia.
Time Frame	Up to Week 72
Safety Issue?	Yes

Analysis Population Description

The Safety population included all patients randomized who received at least one dose of the study medication and had at least one postbaseline safety assessment: PEG-IFN alfa 2-a 180 µg + ribavirin 800 mg = 135 patients; PEG-IFN alfa 2-a 180 µg + ribavirin 1000 or 1200 mg = 274 patients.

Reporting Groups

	Description
PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	
PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg	

Measured Values

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
Number of Participants Analyzed	135	274
Incidence of Adverse Events, Dose Reductions and Withdrawals Due to Anemia [units: Percentage of participants]		
Adverse anemic event	24	32
Serious adverse anemic event	4	4
PEG-INF alfa-2a dose modification due to anemia	2	3
Ribavirin dose modification due to anemia	10	18
Premature PEG-INF alfa-2a withdrawal due to anemia	1	3
Premature ribavirin withdrawal due to anemia	2	3

3. Secondary Outcome Measure:

Measure Title	Virological Response at End of Treatment Period
Measure Description	Virological response at the end of the treatment period was defined as a single last HCV RNA measurement <20 IU/mL at the completion of the treatment period (Days 324 to 351). Patients without an HCV measurement at Week 48 were considered nonresponders.
Time Frame	Week 48
Safety Issue?	No

Analysis Population Description

The All Patients Treated population included all patients randomized who had received at least one dose of study medication: PEG-IFN alfa 2-a 180 µg + ribavirin 800 mg = 135 patients; PEG-IFN alfa 2-a 180 µg + ribavirin 1000 or 1200 mg = 275 patients.

Reporting Groups

	Description
PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	
PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg	

Measured Values

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
Number of Participants Analyzed	135	275
Virological Response at End of Treatment Period [units: Percentage of participants]	30	35

4. Secondary Outcome Measure:

Measure Title	Virological Response at Weeks 4, 12 and 24
Measure Description	Virological response at Weeks 4, 12 and 24 was also defined as a single last undetectable HCV RNA (< 20 IU/mL) falling within the visit windows of Days 16 to 43, 72 to 99, and 156 to 183, respectively. Patients without an HCV measurement at a study week were considered nonresponders at that study week.
Time Frame	Weeks 4, 12 and 24
Safety Issue?	No

Analysis Population Description

The All Patients Treated population included all patients randomized who had received at least one dose of study medication: PEG-IFN alfa 2-a 180 µg + ribavirin 800 mg = 135 patients; PEG-IFN alfa 2-a 180 µg + ribavirin 1000 or 1200 mg = 275 patients.

Reporting Groups

	Description
PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	
PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg	

Measured Values

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
Number of Participants Analyzed	135	275
Virological Response at Weeks 4, 12 and 24 [units: Percentage of participants]		
Week 4	8	7
Week 12	25	25
Week 24	33	40

5. Secondary Outcome Measure:

Measure Title	Relapse of Virological Response
Measure Description	Relapse of virological response was calculated by dividing the number of patients who achieved a virological response at the end of treatment but had detectable HCV RNA at the last assessment posttreatment by the number of patients with a virological response at the end of treatment who had at least one HCV RNA assessment posttreatment.
Time Frame	Weeks 48 and 72
Safety Issue?	No

Analysis Population Description

Within the All Patients Treated population, patients with a response at end of treatment: PEG-IFN alfa 2-a 180 µg + ribavirin 800 mg = 37 patients; PEG-IFN alfa 2-a 180 µg + ribavirin 1000 or 1200 mg = 83 patients.

Reporting Groups

	Description
PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	
PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg	

Measured Values

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
Number of Participants Analyzed	37	83
Relapse of Virological Response [units: Percentage of participants]	32	36

6. Secondary Outcome Measure:

Measure Title	Rapid Virological Response (RVR) by Week 4
Measure Description	RVR was defined as an undetectable HCV RNA < 20 IU/mL (a single last HCV RNA < 20 IU/mL falling in the time window of Days 2 to 43). Patients without an HCV measurement by Week 4 were considered nonresponders.
Time Frame	Week 4
Safety Issue?	No

Analysis Population Description

The All Patients Treated population included all patients randomized who had received at least one dose of study medication: PEG-IFN alfa 2-a 180 µg + ribavirin 800 mg = 135 patients; PEG-IFN alfa 2-a 180 µg + ribavirin 1000 or 1200 mg = 275 patients.

Reporting Groups

	Description
PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	
PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg	

Measured Values

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
Number of Participants Analyzed	135	275
Rapid Virological Response (RVR) by Week 4 [units: Percentage of participants]	8	7

7. Secondary Outcome Measure:

Measure Title	Early Virological Response (EVR), Partial EVR and Complete EVR by Week 12
Measure Description	EVR: Undetectable HCV RNA <20 IU/mL or ≥2 log10 drop from pretreatment level, by Week 12 (a single last HCV RNA <20 IU/mL or ≥2 log10 drop from pretreatment level in the time window of Days 2 to 99). Partial EVR: Detectable HCV RNA but ≥2 log10 drop from pretreatment, by Week 12 (a single last HCV RNA detectable but ≥2 log10 drop from pretreatment in the time window of Days 2 to 99). Complete EVR: Undetectable HCV RNA <20 IU/mL, by Week 12 (a single last HCV RNA <20 IU/mL in the time window of Days 2 to 99). Patients without an HCV measurement by Week 12 were considered nonresponders.
Time Frame	Week 12
Safety Issue?	No

Analysis Population Description

The All Patients Treated population included all patients randomized who had received at least one dose of study medication: PEG-IFN alfa 2-a 180 µg + ribavirin 800 mg = 135 patients; PEG-IFN alfa 2-a 180 µg + ribavirin 1000 or 1200 mg = 275 patients.

Reporting Groups

	Description
PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	
PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg	

Measured Values

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
Number of Participants Analyzed	135	275
Early Virological Response (EVR), Partial EVR and Complete EVR by Week 12		

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
[units: Percentage of participants]		
Early Virological Response	51	61
Partial Early Virological Response	25	35
Complete Early Virological Response	26	26

▶ Reported Adverse Events

Time Frame	[Not specified]
Additional Description	The Safety population included all patients randomized who received at least one dose of the study medication and had at least one postbaseline safety assessment: PEG-IFN alfa 2-a 180 µg + ribavirin 800 mg = 135 patients; PEG-IFN alfa 2-a 180 µg + ribavirin 1000 or 1200 mg = 274 patients.

Reporting Groups

	Description
PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	
PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg	

Serious Adverse Events

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
	Affected/At Risk (%)	Affected/At Risk (%)
Total	21/135 (15.56%)	46/274 (16.79%)
Blood and lymphatic system disorders		
Anaemia	5/135 (3.7%)	8/274 (2.92%)
Autoimmune Thrombocytopenia	0/135 (0%)	1/274 (0.36%)
Haemolytic Anaemia	0/135 (0%)	2/274 (0.73%)
Pancytopenia	1/135 (0.74%)	0/274 (0%)

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
	Affected/At Risk (%)	Affected/At Risk (%)
Thrombocytopenia	1/135 (0.74%)	1/274 (0.36%)
Cardiac disorders		
Acute Myocardial Infarction	0/135 (0%)	1/274 (0.36%)
Atrial Fibrillation	0/135 (0%)	1/274 (0.36%)
Hypertrophic Cardiomyopathy	1/135 (0.74%)	0/274 (0%)
Myocardial Infarction	1/135 (0.74%)	0/274 (0%)
Pericarditis	0/135 (0%)	1/274 (0.36%)
Eye disorders		
Retinal Detachment	0/135 (0%)	1/274 (0.36%)
Gastrointestinal disorders		
Abdominal Pain	0/135 (0%)	1/274 (0.36%)
Colitis	1/135 (0.74%)	0/274 (0%)
Constipation	0/135 (0%)	1/274 (0.36%)
Oesophageal Varices Haemorrhage	0/135 (0%)	1/274 (0.36%)
Pancreatitis	1/135 (0.74%)	0/274 (0%)
Small Intestinal Obstruction	0/135 (0%)	1/274 (0.36%)
Vomiting	1/135 (0.74%)	1/274 (0.36%)
General disorders		
Pyrexia	1/135 (0.74%)	0/274 (0%)
Hepatobiliary disorders		
Cholecystitis Acute	0/135 (0%)	1/274 (0.36%)
Cholelithiasis	0/135 (0%)	1/274 (0.36%)
Infections and infestations		
Anal Abscess	0/135 (0%)	1/274 (0.36%)
Bronchitis	1/135 (0.74%)	2/274 (0.73%)
Bursitis Infective	0/135 (0%)	1/274 (0.36%)

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
	Affected/At Risk (%)	Affected/At Risk (%)
Carbuncle	1/135 (0.74%)	0/274 (0%)
Cellulitis	2/135 (1.48%)	0/274 (0%)
Gangrene	0/135 (0%)	1/274 (0.36%)
Gastroenteritis	1/135 (0.74%)	0/274 (0%)
Gastroenteritis Viral	0/135 (0%)	1/274 (0.36%)
Herpes Zoster	1/135 (0.74%)	0/274 (0%)
Infected Skin Ulcer	1/135 (0.74%)	0/274 (0%)
Influenza	0/135 (0%)	1/274 (0.36%)
Pneumococcal Bacteraemia	0/135 (0%)	1/274 (0.36%)
Pneumonia	1/135 (0.74%)	1/274 (0.36%)
Pneumonia Pneumococcal	1/135 (0.74%)	1/274 (0.36%)
Sepsis	0/135 (0%)	1/274 (0.36%)
Staphylococcal Abscess	1/135 (0.74%)	1/274 (0.36%)
Subcutaneous Abscess	0/135 (0%)	1/274 (0.36%)
Subdiaphragmatic Abscess	0/135 (0%)	1/274 (0.36%)
Urinary Tract Infection	0/135 (0%)	2/274 (0.73%)
Wound Infection	0/135 (0%)	1/274 (0.36%)
Injury, poisoning and procedural complications		
Accidental Overdose	1/135 (0.74%)	0/274 (0%)
Ankle Fracture	0/135 (0%)	1/274 (0.36%)
Multiple Injuries	0/135 (0%)	1/274 (0.36%)
Splenic Injury	0/135 (0%)	1/274 (0.36%)
Metabolism and nutrition disorders		
Abnormal Loss of Weight	0/135 (0%)	2/274 (0.73%)
Dehydration	1/135 (0.74%)	1/274 (0.36%)
Hyperglycaemia	0/135 (0%)	1/274 (0.36%)

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
	Affected/At Risk (%)	Affected/At Risk (%)
Hyponatraemia	0/135 (0%)	1/274 (0.36%)
Neoplasms benign, malignant and unspecified (incl cysts and polyps)		
Benign Lung Neoplasm	0/135 (0%)	1/274 (0.36%)
Hepatic Neoplasm Malignant	0/135 (0%)	1/274 (0.36%)
Lung Adenocarcinoma	0/135 (0%)	1/274 (0.36%)
Nervous system disorders		
Brain Stem Ischaemia	0/135 (0%)	1/274 (0.36%)
Convulsion	1/135 (0.74%)	0/274 (0%)
Optic Neuritis	1/135 (0.74%)	0/274 (0%)
Psychiatric disorders		
Completed Suicide	0/135 (0%)	1/274 (0.36%)
Depression	1/135 (0.74%)	2/274 (0.73%)
Substance Abuse	1/135 (0.74%)	0/274 (0%)
Suicidal Ideation	0/135 (0%)	1/274 (0.36%)
Suicide Attempt	1/135 (0.74%)	0/274 (0%)
Reproductive system and breast disorders		
Epididymitis	0/135 (0%)	1/274 (0.36%)
Prostatitis	0/135 (0%)	1/274 (0.36%)
Respiratory, thoracic and mediastinal disorders		
Asthma	0/135 (0%)	1/274 (0.36%)
Chronic Obstructive Pulmonary Disease	2/135 (1.48%)	0/274 (0%)
Dyspnoea	0/135 (0%)	1/274 (0.36%)
Haemoptysis	0/135 (0%)	1/274 (0.36%)
Respiratory Failure	0/135 (0%)	1/274 (0.36%)
Vascular disorders		
Orthostatic Hypotension	0/135 (0%)	1/274 (0.36%)

Other Adverse Events

Frequency Threshold Above Which Other Adverse Events are Reported: 5%

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
	Affected/At Risk (%)	Affected/At Risk (%)
Total	132/135 (97.78%)	264/274 (96.35%)
Blood and lymphatic system disorders		
Anaemia	33/135 (24.44%)	89/274 (32.48%)
Neutropenia	32/135 (23.7%)	62/274 (22.63%)
Gastrointestinal disorders		
Abdominal Pain	8/135 (5.93%)	13/274 (4.74%)
Constipation	7/135 (5.19%)	10/274 (3.65%)
Diarrhoea	31/135 (22.96%)	60/274 (21.9%)
Dyspepsia	4/135 (2.96%)	17/274 (6.2%)
Nausea	35/135 (25.93%)	69/274 (25.18%)
Vomiting	20/135 (14.81%)	25/274 (9.12%)
General disorders		
Asthenia	14/135 (10.37%)	29/274 (10.58%)
Chills	26/135 (19.26%)	44/274 (16.06%)
Fatigue	64/135 (47.41%)	129/274 (47.08%)
Irritability	20/135 (14.81%)	32/274 (11.68%)
Malaise	8/135 (5.93%)	18/274 (6.57%)
Pain	14/135 (10.37%)	32/274 (11.68%)
Pyrexia	36/135 (26.67%)	63/274 (22.99%)
Infections and infestations		
Bronchitis	9/135 (6.67%)	10/274 (3.65%)
Upper Respiratory Tract Infection	8/135 (5.93%)	27/274 (9.85%)
Urinary Tract Infection	5/135 (3.7%)	16/274 (5.84%)

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
	Affected/At Risk (%)	Affected/At Risk (%)
Investigations		
Weight Decreased	21/135 (15.56%)	50/274 (18.25%)
Metabolism and nutrition disorders		
Decreased Appetite	34/135 (25.19%)	61/274 (22.26%)
Musculoskeletal and connective tissue disorders		
Arthralgia	23/135 (17.04%)	38/274 (13.87%)
Back Pain	16/135 (11.85%)	19/274 (6.93%)
Muscle Spasms	8/135 (5.93%)	9/274 (3.28%)
Myalgia	39/135 (28.89%)	53/274 (19.34%)
Nervous system disorders		
Dizziness	17/135 (12.59%)	30/274 (10.95%)
Headache	48/135 (35.56%)	93/274 (33.94%)
Psychiatric disorders		
Anxiety	16/135 (11.85%)	26/274 (9.49%)
Depression	30/135 (22.22%)	68/274 (24.82%)
Insomnia	35/135 (25.93%)	78/274 (28.47%)
Respiratory, thoracic and mediastinal disorders		
Cough	10/135 (7.41%)	25/274 (9.12%)
Dyspnoea	10/135 (7.41%)	25/274 (9.12%)
Epistaxis	3/135 (2.22%)	14/274 (5.11%)
Skin and subcutaneous tissue disorders		
Alopecia	9/135 (6.67%)	19/274 (6.93%)
Dry Skin	9/135 (6.67%)	17/274 (6.2%)
Hyperhidrosis	7/135 (5.19%)	8/274 (2.92%)
Night Sweats	7/135 (5.19%)	10/274 (3.65%)
Pruritus	5/135 (3.7%)	21/274 (7.66%)

	PEG-IFN Alfa-2a 180 µg + Ribavirin 800 mg	PEG-IFN Alfa-2a 180 µg + Ribavirin 1000 or 1200 mg
	Affected/At Risk (%)	Affected/At Risk (%)
Rash	12/135 (8.89%)	26/274 (9.49%)

▶ Limitations and Caveats

[Not specified]

▶ More Information

Certain Agreements:

Principal Investigators are NOT employed by the organization sponsoring the study.

There IS an agreement between the Principal Investigator and the Sponsor (or its agents) that restricts the PI's rights to discuss or publish trial results after the trial is completed.

The Study being conducted under this Agreement is part of the Overall Study. Investigator is free to publish in reputable journals or to present at professional conferences the results of the Study, but only after the first publication or presentation that involves the Overall Study. The Sponsor may request that Confidential Information be deleted and/or the publication be postponed in order to protect the Sponsor's intellectual property rights.

Results Point of Contact:

Name/Official Title: Medical Communications

Organization: Hoffmann-La Roche

Phone: 800-821-8590

Email: