## Vicky Marvin

From:

Graham Foster

Sent:

08 March 2006 07:57

To:

Alana Miller

Subject: HCV Appraisal

Thank you for sending me the draft appraisal relating to guidance number 75.

This is a very comprehensive assessment with a balanced view of the evidence. I believe that the recommendations will be widely welcomed by clinicians and their patients. I have a few minor suggestions.

Page 4 – para 1.8 and 1.9. I agree that the current dataset does not permit a firm conclusion to be drawn regarding re-treatment, therapy in children and therapy for those who have undergone liver transplantation. However the tone of these recommendations (treatment is not recommended) is a little robust and might dissuade clinicians from attempting therapy when there are extenuating circumstances. For example my own practice is to offer therapy to teenage children who are concerned about transmission and I would consider therapy for a patient with mild hepatitis C who had received a second liver transplant if HCV recurrence had led to loss of the first graft (there is some anecdotal data to suggest that patients who develop aggressive HCV recurrence in a transplanted liver may do so again if they are retransplanted for recurrent HCV). I appreciate that these are unusual circumstances but the statement that treatment should NOT be given may make it difficult to obtain support for therapy in these unusual circumstances. I would therefore prefer a slightly more guarded statement such as:-

'There is insufficient data to assess the value of therapy for people with mild hepatitis C who are younger than 18 years or those who have had a liver transplant. Therapy would not normally be considered appropriate for such patients.'

This will dissuade clinicians from treating such patients but will not act as an absolute barrier in unusual circumstances.

Page 5 para 2.2 is ambiguous. In the setting of acute infection most people are asymptomatic but 20% do develop symptoms and occasionally jaundice. Many chronically infected patients are polysymptomatic and suffer from vague non-specific symptoms. I suggest that the first two sentences be re-written to read:-

'People acutely infected with hepatitis C are often asymptomatic, but about 20% will develop overt hepatitis. Many chronically infected patients will experience non-specific symptoms including malaise, weakness and anorexia.'

I hope that these comments are helpful and look forward to reading the final version

With best wishes Graham

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