Editorial

Hepatitis C: Are we getting close to control?

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Hepatitis C has been common disease in our country whether in the community\textsuperscript{1} or in the hospitals.\textsuperscript{2} It affects quality of life seriously\textsuperscript{3} and has resulted in highest in-patient mortality with chronic liver disease.\textsuperscript{4} The disease is frequently associated with diabetes mellitus\textsuperscript{5} and has become the commonest cause of hepatocellular carcinoma in our country.\textsuperscript{6}

There have been reports of excellent sustained viral response from combination treatment with standard interferon and ribavirin in our patients.\textsuperscript{7} This has been due to the fact that the most frequent serotype in our population\textsuperscript{8} has been type 3, which is most responsive to treatment.

In this issue of the journal, an excellent response to anti-viral treatment is reported,\textsuperscript{9} further confirming earlier reports in this respect. While pegylated interferon is becoming the interferon of choice in more developed countries\textsuperscript{10} for our setting, with serotype 3 prevalence, it is heartening to see a sustained viral response to standard interferon consistently better than 80\%. This is important when we are seeing more and more public awareness of the disease with early treatments in these patients. This, coupled with satisfactory treatment response and gradually declining cost of therapy, should make us hopeful that soon we may be able to get a handle on this serious disease.

While non-responses\textsuperscript{11} and relapses\textsuperscript{12} remain a problem, with all the factors discussed above, and further impetus from regulatory effects of blood screening and use of disposable syringes, the combination of standard interferon and ribavirin should encourage all concerned that we may be closing up on the devastating disease.
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