6.1% (n=10) were genotype 3b. 3.0% (n=5) were genotype 1a. n=01 had genotype 1b. 4.2% (n=7) had mixed genotype (3a, 3b/1a, 1b, 3a, 3b).

**Conclusion:** Majority (85.9%) of chronic hepatitis C patients were genotype 3a which is associated with favorable outcome after 24 weeks of conventional interferon and ribavirin therapy and only 3.0% had genotype 1a in this cohort.

**PP-130** Virological response in relation to biochemical changes in chronic hepatitis C patients in a tertiary care hospital in Pakistan
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**Background:** Alanine aminotransferase is an enzyme produced in hepatocytes and its raised levels in serum indicate hepatocyte damage. Furthermore, the number of patients with sustained viral response (SVR) and with sustained ALT normalization in non-SVR patients was also significantly higher in the combination therapy versus monotherapy group.

**Objectives:** To study the effect of initial ALT levels on predicting sustained virological response in HCV infected patients getting conventional Interferon alpha 2b and Ribavirin combination therapy in the Gastroenterology and Hepatology division of Holy Family Hospital under the National program for prevention and control of hepatitis in Pakistan.

**Methodology:** Retrospective observational study on the records of patients diagnosed as HCV positive coming for conventional Interferon and Ribavirin therapy to the Gastroenterology and Hepatology division, Department of Medicine, Holy Family Hospital, Rawalpindi, Pakistan

**Results** (n=89): Group I: ALT value less than or equal to 45 U/L as normal.
- n=25; SVR achieved 80.0%, n=20; Relapser 20.0%, n=05
Group II: ALT 45-90
- n=33; SVR achieved 81.8%, n=27; Relapser 18.8%, n=06
Group III: ALT > 90
- n=31; SVR achieved 64.5%, n=20; Relapser 35.5%, n=11

**Conclusion:** It was concluded that there is significant PCR negativity at 24 weeks in patients with ALT levels up to 90 U/L as compared to the patients with ALT levels more than 90 U/L.

**PP-131** Biochemical Response with interferon alpha 2b and ribavirin combination therapy in chronic hepatitis C patients
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**Background/Aim:** Alanine aminotransferase is an enzyme produced in hepatocytes and its raised levels in serum indicate hepatocyte damage. Conventional Interferon being an immune modulator and Ribavirin being a nucleoside analogue antiviral drug is believed to suppress hepatocyte damage and inflammation and so decrease the levels of ALT in serum of patients with high ALT levels undergoing combination therapy. The aim is to study the changes in ALT levels in HCV infected patients getting conventional Interferon alpha 2b and Ribavirin combination therapy.

**Methodology:** Retrospective observational study on the records of patients diagnosed as HCV positive coming for conventional Interferon and Ribavirin therapy to the Gastroenterology and Hepatology division of Holy Family Hospital under the National program for prevention and control of hepatitis in Pakistan. It is to be noted that pathology lab at Holy Family Hospital takes a deviation of 42.194. Furthermore, 461 patients had ALT levels more than 45 before starting combination therapy and out of these 461 patients 69.6%, n=321 had normalization of ALT levels (<45 IU/L).

**Conclusion:** It was concluded that use of Conventional Interferon alpha 2b and Ribavirin combination therapy in patients with chronic Hepatitis C, ALT levels show trend towards Normalization.

**PP-132** Thrombocytopenia in chronic hepatitis C patients treated with conventional interferon and ribavirin in a tertiary care hospital of Rawalpindi, Pakistan
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**Background:** Thrombocytopenia is one of the major adverse effects of IFN-α and Ribavirin often leading to dose reduction or treatment discontinuation. Recent data demonstrated that 4-6% of patients underwent dose modification secondary to thrombocytopenia. Reduction of the dose is recommended at 50,000 cells/cmm and discontinuation, if the platelet count drops below 30,000 cell/cmm. It is now a known fact that dose reduction or interruption of therapy leads to lesser SVR.

**Methods:** This observational study was conducted in chronic hepatitis C patients treated with conventional interferon 3 MIU thrice weekly and ribavirin 400 mg bid for 24 weeks. All patients had raised ALT levels for last 06 months, had positive PCR for HCV RNA by real time method and liver biopsy was done. Platelet counts along with hemoglobin concentration and TLC were monitored in all patients on monthly basis. Data was analyzed by using SPSS 13.0

**Results:** Out of 422 patients 15% (n=63) developed thrombocytopenia at 12 weeks whereas out of the remaining 359 patients another 6% (n=22) developed thrombocytopenia at 24 weeks of therapy. 70 Patients had platelet count in the range of 100-150,000 cells/cmm. 11 patients had platelet count less than 100,000 cells/cmm and 02 patients had platelet count less than 50,000 cells/cmm.

**Conclusion:** We conclude that thrombocytopenia is present in a significant number of patients receiving conventional interferon and ribavirin therapy (15% at week 12 and 6% at week 24). 02 patients needed discontinuation of therapy.

**PP-133** Correlation of alanine aminotransferase (ALT) levels with necroinflammatory score and stage of fibrosis on liver biopsy in chronic hepatitis C patients
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**Background/Aims:** Hepatitis C is the most common cause of Chronic Liver Disease in Pakistan with HCV prevalence of 4%. Liver Biopsy is done for suitability of treatment based on necroinflammatory score (grade) and stage of fibrosis. The aim of this study is to evaluate the staging and grading of histological changes on liver biopsy in Chronic Hepatitis C patients and its correlation with serum ALT levels.

**Methods:** Retrospective descriptive study on the patient records at Gastroenterology and Hepatology division of Holy Family Hospital including patients of Chronic Hepatitis C undergoing first liver biopsy with no prior treatment and excluding those with other indications for biopsy. Data was analyzed using SPSS 13.