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inhibit the expression of HBsAg, HBeAg, and HBV DNA replication in vitro in a dose-dependent manner. A RT-PCR analysis indicated that the expression of cccDNA changed significantly in the MP treatment group compared to the control group and in a dose and time-dependent manner. FK506 did not the same role in the levels of HBVDNA and cccDNA. However, FK506 at different nontoxic contrations showed no significant inhibitory effect on the levels of HBsAg HBeAg and HBVDNA.

Conclusion: Our study identified MP does- and time-dependently inhibits the HBV replication in vitro, and found that cccDNA for this inhibitory effect. FK506 does not exercise similar effects.

PP-063 NOTCH 1 regulates FOXP3 regulatory T cells and deranged TGF- β signaling in progressive stages of hepatitis B infection

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Objectives: Notch receptors are implicated in modulating the differentiation of antigen specific T cells to regulatory T cells. TGF- β as a key mediator, acts synergistically with regulatory cells. Our objective was to study the expression of Notch 1, FOXP3 and TGF-β signaling in PBMCs, liver infiltrated lymphocytes in patients with HBV infection.

Methods: Patients with chronic hepatitis B (CHB) (n=10) (age 29.4 ± 13.2 yr., M:F=8:2), HBV cirrhosis (n=8) (age- 45.6 ± 12 yr. M:F=2:1) and liver biopsies from normal liver (n=8) (age 49 ± 3.8 yr. M:F=3:1) were studied. PBMCs and LIL were isolated from blood and liver tissues. Percentages of regulatory T cells with Notch expression were analyzed by FACS Analysis. mRNA expression of Notch1, HES1, Jagged1, TGF-β, STAT1, SMAD3 and SMAD4 genes was analyzed by quantitative RT-PCR in PBMCs, LIL and biopsies.

Results: There was a significantly higher co-expression of Notch1 and the percentages of NOTCH1/FOXP3 (50.4% vs.3.72 and 2%) (p=0.05) in liver infiltrated lymphocytes of cirrhotic patients than peripheral blood. Expression of TGF-β, STAT1, SMAD3 and SMAD4 in cirrhotic LIL was significantly 2-3 folds lower than PBMCs. In chronic HBV biopsies, expression of TGF- β , STAT1, SMAD3 and SMAD4 was 4-6 folds higher than in normal liver biopsies.

Conclusion: We showed that higher expression of Notch1 and FOXP3 expression in liver infiltrated lymphocytes may have differentiated induced regulatory T cells. However, decreased expression of TGF- β and its downstream signaling molecules in LILs may be responsible for loss of its regulatory cells suppressive ability.

PP-064 A tenofovir therapy HBV mathematical model for HBeAg negative and positive patient

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Background: HBeAg negative and HBeAg positive patients are different in the HBV replication rate. Based on P.Marcellin et al's clinical data and the HBV infection dynamic model proposed by Nowak et al. we set up a Tenofovir therapy model for HBeAg negative and positive, which have good agreement with above clinical data.

Methods: A model of HBV is described by four variables: x, y, v, z represent uninfected cells, infected cells, free virus, and immune cells. The model include 10 parameters: λ , d, b, a, p, k, u, k2, k3, k4 where the meanings of λ , d, b, a, p, k, u are the same as those given in Nowak's model, k2 represents the curative effect, k3, k4 are relevant to the immune, we choose $\{\lambda, d, b, d\}$ a, p, u, k3, k4 = 4.621e5, 6.9e-3, 6.508e-4, 6.9e-3, 0.058, 0.35,0.95, 0.036}

For HBeAg positive and negative, we chose k=5, k=4.85, and k=2. k2=1.98 respectively, which reflect the different HBV replication rate between HBeAg positive and negative patient.

Results: The simulation data of our model are qualitatively agreement with the HBeAg positive and negative clinical data during the treatment with Tenofovir.

Conclusion: The discrepancy between HBeAg negative and positive were reflected through different parameters by our model, which shows our model may possibly capture the dynamics of anti-HBV infection treatment with Tenofovir.

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PP-065 | Therapeutical effect of Ademetionine (Transmetil) for chronic cholestasis diseases

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Objective: To evaluate the efficacy and safety of different dosage of Ademetionine (Transmetil) in different cholestasis diseases.

Methods: It's a retrospective study, 56 cases who treated with Ademetionine (Transmetil) were assigned to 1g/d and 2g/d by the dosage they used. There is no statistic difference between the two groups in age, height, body weight, heart rate, blood pressure and sex ratio (P > 0.05). The levels of ALT, AST, TBiL, DBiL, GGT and TBA before treated and 2 weeks after treated of both groups were observed.

Results: After 2 wk of treatment, the levels of ALT, AST, TBiL, DBiL, GGT and TBA were reduced significantly (p=0.001, 0.002, 0.029, 0.01, 0.002, 0.002 P < 0.05) compared with those before treatment, but the reduced levels of ALT, AST and GGT had no marked difference between the two groups (p=0.055, 0.14, 0.774 P>0.05). And the reduced levels of TBiL, DBiL and TBA were significantly different between the two groups (p=0.025, 0.038, 0.039 P<0.05). No severe adverse reactions were found in both groups.

Conclusions: Ademetionine (Transmetil) has obvious effect on Cholestasis diseases, and the treatment of dosage 2g/d has more effective in reduce TBiL, DBiL and TBA than that of 1g/d. It's safe in both dosage groups.

PP-066

Effect of adeforvir dipivoxil on HBcAg-specific cytotoxic T cells in patients with chronic hepatitis B

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Background: To study the effect of adeforvir dipivoxil on HBcAgspecific cytotoxic T cells in patients with chronic hepatitis B

Methods: Frequency of circulating HBcAg-specific cytotoxic T cells from 11 HLA-A2+ patients with chronic hepatitis B were studied longitudinally before and after adeforvir dipivoxil therapy by HLA-A2/peptide tetramer staining.

Results: Frequencies of HBcAg-specific cytotoxic T cells were no significant differences between before and after adeforvir dipivoxil therapy.

Conclusion: There is probably no effect effect of adeforvir dipivoxil on HBcAg-specific cytotoxic T cells in patients with CHB.

PP-067

Effects of interventional therapy for primary liver carcinoma on the liver function of patients

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Background: The effects of interventional therapy for hepato-