HALT-C Responder Phase

Lead-in Group Patients who demonstrate a virological response at Week 20 to the Lead-In Phase treatment are considered Week 20 Responders. They are not eligible for randomization into the HALT-Randomized Phase of the HALT-C Trial at this time, but will be followed on a parallel protocol during the Responder Phase. For more information on Week 20 Responders, see Section I of the HALT-C Trial Protocol.

Week 30 (W30) through Week 72 (W72) Study Visits
Responder Phase patients will remain on treatment through week 48 (W48). While on treatment, patients will be seen every 6 weeks. There will be 2 further follow-up visits at weeks 60 and 72 (W60 and W72). The following testing and interviews must be performed:

Patient administered questionnaires
- QOL (Form #40) to be completed at W72
- Beck (Form #44) to be completed at W36, W48, W60 + W72
- Symptoms (Form #43) to be completed at every visit
- Alcohol use (Form #42) at W48 + W72

Interviews
- Medications Interview (Form #12) to be completed at every visit
- Study Visit (Form #10) to be completed at every visit
- Life Events Status (From #45) to be completed at W72

Tests
- Physical exam (Form #11) to be performed at W36, W48 + W72
- Ultrasound, MRI, CT evaluation of the liver (Form #22): to be done at W48 + W72

Local lab tests (Forms #30 and #34)
- Fasting serum chemistries at W48, W60 and W72 (BUN, creatinine, glucose, uric acid, triglycerides)
- Liver chemistries ((AST, ALT, alkaline phosphatase, total bilirubin, albumin, and globulin [or total protein])
- Liver function tests at every visit (AST, ALT, alkaline phosphatase, total bilirubin, albumin, and globulin [or total protein])
- Complete blood count with diff at every visit (WBC, neutrophils, hematocrit, hemoglobin, platelets)
- Prothrombin time (INR) at W36, W48, W60 and W72
- Uric acid at W48
- Thyroid stimulating hormone (TSH) at W36, W48 and 72
- Alfa-fetoprotein at W36, W48, W60 and W72 (Form #34)
- Pregnancy test (for women of child bearing potential) at W30, W36, W42,and W48
- Urinalysis of heme and protein at W48

Central lab tests (Forms #31, 74)
- HCV-RNA at W36, W48, W60 and W72 (sent to central repository for shipping for the central virology lab. See Section E, Specimen Collection, Processing, and Shipping for more information).
- Serum aliquots for repository at every visit.

Forms

- Form #10, Study Visit
- Form #11, Physical Exam
- Form #12, Medications Interview
- Form #15, CTP Score
- Form #22, Ultrasound
- Form #30, Local Lab
- Form #31, Central Lab-HCV RNA
- Form #34, AFP
- Form #40, Quality of Life
- Form #42, Alcohol Use
- Form #43, Symptoms
- Form #44, Beck
- Form #45, Life Events Status
- Form #74, Week 20 Responder Aliquot Form

Treatment

Patients will continue on Peginterferon alfa-2a 180 μg sc weekly plus1000-1200 mg of ribavirin by mouth or current dose, daily in two divided doses up until W 48. Dispense medications at each visit. Notify the pharmacy that the patient is a Week 20 Responder.

Discontinuation of treatment

Patients will be discontinued from treatment if they develop any of the following criteria. For more information on discontinuation of treatment, please Section I, Adverse Events.

1. Pregnancy
2. Liver transplant
3. Hepatocellular carcinoma (HCC)
4. UNOS Status 2b, as defined by the 1999 UNOS Transplant Criteria Meeting:
   a. Presence of a small hepatocellular carcinoma
   b. CTP score of 10 or more OR
   c. CTP score of 7 or more plus one of the following
      - Documented unresponsive variceal hemorrhage
      - Hepatorenal syndrome
      - Occurrence of one episode of spontaneous bacterial peritonitis
      - Refractory ascites or hepatohydrothorax unresponsive to treatment
5. Intolerant or non-compliant of trial medication
   - If 4 or more consecutive doses of Peginterferon alfa-2a have been missed, the patient should be considered intolerant or non-compliant of trial medication.
6. Patient withdraws consent/refuses follow-up.
7. Patient is not compliant of visits.
8. Patient is lost to follow up.
9. Patient leaves the area.

Breakthrough or Relapse patients

If a W20 Responder has a positive HCV-RNA at W36, W48, W60 or W72, s/he may be considered for randomization as a Breakthrough or Relapse patient. A confirmatory positive test will be needed. See D.3: Randomization Phase for details.