

Interferon Therapy for Hepatitis C/HIV Coinfected Patients Affected by Bipolar Disorder

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Background: Although the exact rate of coinfection with HIV and hepatitis C in bipolar patients is not known, hepatitis C virus (HCV) alone affects 10% to 15% of this particular patient population. The neuropsychiatric side effects of interferon along with comorbid psychiatric illness are a challenging situation for both physician and patient. Furthermore, some of these patients are denied therapy based on their diagnosis. Our purpose was to study the response of HCV therapy in bipolar coinfecting patients along with psychiatric assessment, treatment and follow-up.

Methods: A retrospective analysis was done in bipolar patients with hepatitis C/HIV coinfection to see the response rate of standard interferon therapy along with ribavirin. The patients were closely monitored by psychiatry for any change in affect, and were prescribed medication and psychotherapy along with HCV therapy.

Results: Of a sample size of 50, 6 (12%) coinfecting patients with *DSM- IV* criteria for bipolar disorder were subjected to HCV therapy. Four out of 6 (66%) bipolar patients had a history of amphetamine abuse and reported affective symptoms induced by interferon therapy. These patients were concomitantly treated and followed by psychiatry. Five out of 6 (83%) patients achieved sustained virologic response (SVR). One patient temporarily halted the treatment due to psychosis but restarted later, achieving SVR.

Conclusions: Concern for neuropsychiatric side effects of interferon leads to under treatment in bipolar patients coinfecting with HIV and HCV. In our experience treatment success can be achieved by management of affective symptoms and psychiatric intervention. Therefore, patients with bipolar disorder should not be denied interferon therapy.

Laveeza Bhatti, MD, PhD, has disclosed the following:

- Has acted as a speaker for Bristol-Myers Squibb Company, Boehringer Ingelheim, GLAXOSMITHKLINE, and Roche Laboratories, Inc.
- Has served as a consultant for Bristol-Myers Squibb Company, Gilead Sciences, Inc., Pfizer Inc, Merck & Co., Inc., and Tibotec Therapeutics