

Comparisons of efficacy and safety between Tenofovir and Entecavir drugs in chronic hepatitis B patients

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		<input type="checkbox"/> Protocol
Registration date 03/09/2019	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input type="checkbox"/> Results
Last Edited 06/09/2019	Condition category Infections and Infestations	<input type="checkbox"/> Individual participant data
		<input type="checkbox"/> Record updated in last year

Plain English summary of protocol

Background and study aims

Hepatitis B virus (HBV) infection is an important global health problem with an estimated 400 million chronically infected people. Patients with chronic hepatitis B (CHB) have a lifetime risk of 15-40% to develop liver cirrhosis and hepatocellular carcinoma (HCC). Increasing HBV DNA levels have also been shown to be associated with increasing risk of liver cirrhosis and HCC. Thus, one of the primary objectives of anti-HBV therapy is complete sustained suppression of viral replication to prevent HBV related cirrhosis, HCC and even mortality. Entecavir (ETV) and Tenofovir (TDF) are two potent drugs to suppress viral replication with lower rate or absence of long-term resistance in clinical trials and real-world experience. ETV and TDF are recommended as first line antiviral agents in CHB treatment.

Who can participate?

Patients with CHB and NA-naïve HBeAg-positive or HBeAg-negative over age 20 who meet the national reimbursement criteria in Taiwan.

What does the study involve?

Participants are randomized 1:1 to receive ETV 0.5mg or TDF 300mg once daily for 144 weeks. All patients were followed up at week 4 and 12 and then every 12 weeks after.

What are the possible benefits and risk of participating?

Participants may benefit from Tenofovir or Entercavir treatment in patients with chronic active hepatitis or cirrhosis.

Possible risks may be mild decrease eGFR and bone density changes.

Where is the study run from?

Kaohsiung Chang Gung Memorial Hospital, Taiwan

When is the study starting and how long is it expected to run for?

April 2012 to July 2018

Who is funding the study?
Investigator initiated and funded

Who is the main contact?
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Contact information

Type(s)
Scientific

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Additional identifiers

EudraCT/CTIS number
Nil known

IRAS number

ClinicalTrials.gov number
Nil known

Secondary identifying numbers
100-06070D

Study information

Scientific Title
Comparisons of efficacy and safety between Tenofovir and Entecavir in chronic hepatitis B patients: an open level randomized clinical trial

Study objectives
Tenofovir and Entecavir have similar antiviral efficacy but Tenofovir has an adverse effect on renal and function and bone density

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 30/04/2012, Ethics Committee of Chang Gung Memorial Hospital (No 199, Dunhua N Rd. Songshan Dist. Taipei City, Taiwan; ccyi@cgmh.org.tw; +886-3-3196200 ext 3713), ref: 100-06070D

Study design

Open level randomized control trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

Hospital

Study type(s)

Treatment

Participant information sheet

Not available in web format, please use the contact details below to request a patient information sheet

Health condition(s) or problem(s) studied

Hepatitis B

Interventions

This was a randomized, open-label study in NA-naïve HBeAg-positive and HBeAg-negative patients with CHB.

Each patient was randomized 1:1 to receive ETV 0.5mg or TDF 300mg once daily for 144 weeks. Randomized treatment assignments were generated by a central randomization center. Patients were randomized using a block design stratified by gender, HBeAg status, HBV-DNA levels and cirrhosis status.

All patients were followed up at week 4 and 12 and then every 12 weeks after.

Intervention Type

Drug

Phase

Not Applicable

Drug/device/biological/vaccine name(s)

Tenofovir disoproxil fumarate, Entecavir

Primary outcome measure

Proportion of patients with undetectable HBV DNA level at week 48, 96 and 144. Serum HBV DNA levels were analyzed using the Cobas AmpliPrep-Cobas TaqMan HBV test (CAP-CTM)(Roche Molecular System, Inc., Branchburg, NJ, USA), with a lower detection limit of 70 copies/ml

Secondary outcome measures

1. Presence of HBsAg, HBeAg was assessed using electrochemiluminescence immunoassay (ECLIA) 3.0
2. Renal function measured by the serum creatinine and estimated glomerular filtration rate (eGFR)
3. Anti-HDV antibodies was assessed using radioimmunoassay (Abbott, North Chicago, IL, USA)

Overall study start date

01/04/2012

Completion date

03/08/2018

Eligibility

Key inclusion criteria

The inclusion criteria included three populations:

1. Chronic hepatitis B patients with hepatitis B virus surface antigen (HBsAg)
 - 1.1 Positive status for more than 6 months
 - 1.2 Elevated alanine transferase (ALT) levels $\geq 5 \times$ ULN (200 IU/L) or ALT levels between $2 \times$ and $5 \times$ ULN combined HBV DNA ≥ 20000 IU/ml for HBeAg positive patients
 - 1.2 ALT levels over $2 \times$ ULN combined HBV DNA ≥ 2000 IU/ml for HBeAg negative patients
2. Acute hepatic decompensated patient (prolong prothrombin time >3 sec and bilirubin >2 mg/dL) with positive for HBsAg
3. Clinical cirrhosis with HBV DNA ≥ 2000 IU/ml. The clinical evidence of cirrhosis was defined by one of the following
 - 3.1 Ultrasound diagnosed liver cirrhosis with evidence of splenomegaly or esophageal or cardiac varices
 - 3.2 Liver biopsy diagnosed liver cirrhosis
4. Aged 20 years or older.

Participant type(s)

Patient

Age group

Adult

Sex

Both

Target number of participants

144 HBeAg positive patient; 144 HBeAg negative patient

Key exclusion criteria

1. Patients who had co-infection with human immunodeficiency virus, hepatitis C virus, hepatitis D virus or hepatitis E virus by serological assays
2. Patients who had a significant intake of alcohol (>20g/day for women; 30 g/day for men)

Date of first enrolment

01/04/2012

Date of final enrolment

31/07/2016

Locations

Countries of recruitment

Taiwan

Study participating centre

Kaohsiung Chang Gung Memorial Hospital

123 Ta-Pei Road

Niao Sung District

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Sponsor information

Organisation

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Sponsor type

Hospital/treatment centre

Website

<https://www1.cgmh.org.tw/branch/shk/index.htm>

ROR

Funder(s)

Funder type

Other

Funder Name

Investigator initiated and funded

Results and Publications

Publication and dissemination plan

Planned publication in a high-impact peer-reviewed journal

Intention to publish date

30/10/2019

Individual participant data (IPD) sharing plan

All data generated or analysed during this study will be included in the subsequent results publication

IPD sharing plan summary

Other