

## Correspondence

### **Possible herbal treatment for C4HCV patients who are not suitable for interferon based treatment**

*To the Editor*

In your ground breaking and informative issue on the hepatitis C virus (HCV), it was suggested that there are groups of chronic HCV (CHCV), genotype 4, patients who cannot be helped by peg interferon and ribavirin therapy. These groups were 1. Those patients who did not respond after 12 weeks of peg interferon and ribavirin treatment.<sup>1</sup> 2. Those patients who did not achieve a sustained virological response after 24 weeks of treatment.<sup>1</sup> 3. Some patients who found the side effects so severe that they discontinued the treatment.<sup>1</sup> 4. Decompensated liver cirrhosis patients.<sup>1</sup> 5. Patients who cannot for whatever reason receive government medical coverage and cannot afford to pay for the peg interferon and ribavirin treatment.

There is however, some research, which might provide some relief to all of these groups of patients. Two Cairo researchers, Essam Hob Allah, a microbiologist, and Said Shalaby, a practicing hepatologist have worked for a decade or more on non-interferon based treatment for HCV. The treatment is herbal based and has been tested successfully on patients who previously received interferon based treatments. While the mechanism of action is not known, it is unlikely to be the same mechanism of action as the peg interferon ribavirin treatment. If so, then the herbal remedy may be effective in those instances when the peg interferon and ribavirin approach fails. The herbal treatment also avoids all of the side effects of the peg interferon and ribavirin treatment. This is not altogether surprising, as herbal remedies, sometimes

in use for centuries, are relatively free of severe side effects.<sup>2,3</sup> The cost of the herbal treatment, while not now known, should be much less than the estimated US\$20,000 cost or 50,000 Egyptian pound cost in Cairo.

If anyone in the Kingdom of Saudi Arabia (KSA) would like to examine the data accumulated by the Cairo researchers. Please email the undersigned. The next step may be to expand the type 4 CHCV studies in KSA to include the herbal treatment.

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### **Reply from the Author**

I note the correspondence of Mr. Joseph Canepa on the article published in the Saudi Medical Journal on hepatitis C and its treatment<sup>1</sup> and his suggestion to use medical herbs that have already been used by Essam Hob Allah and Said Shalaby from Egypt for the treatment of Hepatitis C, which did not respond to alpha interferon or pegasis. I am of the opinion that this should be read with the previous articles and correspondence on this topic.

**Osama A. Shobokshi**

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### **References**

1. Shobokshi. Algorithm for Treatment of Chronic Hepatitis C *Saudi Med J* 2003; 24 (Suppl 2): S117.
2. Zasloff M. Antimicrobial Peptides of Multicellular Organisms. *Nature* 2002; 415: 389-395.
3. McNeil DG Jr. Herbal Drug Is Embraced in Treating Malaria. *New York Times* 2004; Sect. A: 1 (col. 2).