Here we report a case of Sofosbuvir + Peg-Interferon + Ribavarin therapy result for a patient with hepatitis C virus related liver cirrhosis and hypersplenism. Due to reduced PLT count and WBC, elective laparoscopic splenectomy was done prior initiation of antiviral treatment in a middle-aged female patient. Laparoscopic splenectomy was with an uneventful post-operative course and combined antiviral treatment was started.

This is the first reported case in Mongolia to our knowledge.

A 45-year-old Mongolian lady visited to gastroenterology OPD with 6 months history of fatigue, RUQ tenderness.

She was known with anti-HCV positive, 3 months ago

Appendectomy in 1997 and C-section in 2004

She denied smoking and alcohol intake

Allergy: penicillin

Method of surgery

Patient in supine position, 5 trocars were used, 120 degree telescope ENDOCAMELEON (KARLSTORZ, GERMANY) was used. Anterior approach: after sectioning of Lig. Gastro-coic, Lig. Spleno-colic, Lig. Gastro-splenic and mobilization of Splenic flexure using an ultrasonic shear, SONOSURG, OLYMPUS, JAPAN Splenic artery was isolated at upper border of the pancreas and temporarily occluded with Hem-o-lock clip. Splenic hilium dissection with consequent taping on vessel loop. Splenic hilar transection using ECHELON FLEX 60 mm stapler. Removal of Hem-o-lock clip from Splenic artery. Hemostasis control and irrigation and aspiration of surgical field with normal saline. A JP drain tube was placed in left upper abdomen. Removal of specimen through Pfannenstiel incision.

Operative time 320 minutes. Estimated blood loss < 30ml. Hospital stay 5 days. Hematologic parameters were checked at POD 1, 3, 5, 7 and 30 with normalized results.

Antiviral treatment

RVR

Undetectable viral load at 4 weeks of treatment

Relapse

HCV at the 12th week after end of treatment

Treatment regimen

Peg-Interferon α2a 180mcg QW
Ribavirin 1000 mg/day
Sofosbuvir 400 mg/day

12 weeks

Conclusion

Hepatitis C cirrhotic patient is poorly tolerate peg-interferon based regimen

Closer monitoring is needed to recognize side effects

Although drug induced severe thrombocytopenia in cirrhotic patient is prevented by splenectomy, severe neutropenia could be another cause of treatment discontinuation