

VIRAL HEPATITIS STUDY GROUP
UNIVERSITY DEPARTMENT OF MEDICINE

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SK/SKB/11006127

11 May 1995

Dr A Bose
The Surgery
48 Bridge Road
Grays
Essex RM17 6BZ

Dear Dr Bose

Re: Suzanne JONES dob: [GRO-C] 66
[GRO-C] Essex

DIAGNOSIS: Chronic hepatitis C
Hypothyroidism post-interferon therapy

This is to let you know that whilst on interferon, Suzanne Jones has become hypothyroid. Her TSH is >40 mU/l with a free T4 of <5 pmol/l. Accompanying this, she has put on some weight and has dry skin and also headaches.

I stopped her interferon about a month ago, however her thyroid function has not improved at all and I am therefore starting her on thyroxine 100 mcg per day as there is no evidence of a spontaneous recovery of her thyroid function tests. Interferon can cause long lasting hypothyroidism and I have warned Suzanne of this possibility.

Unfortunately, her liver function tests have relapsed as well. She had made a good response to interferon but since stopping it her transaminases have increased from 28 u/l

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Suzanne JONES

to 289 u/l. It may be that she requires a further course of interferon or we could even consider her for combination therapy of interferon plus ribavirin. We shall see her again in two weeks to assess her thyroid status.

Yours sincerely

S I Khakoo MRCP
Research Fellow

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