Successful Treatment with Radiotherapy in a Patient who Developed Severe Graves-like Ophthalmopathy After Treatment with Pegylated Interferon Alpha-2A for Hepatitis C.

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Introduction

- Interferon treatment for hepatitis C has been associated with Graves-like thyroiditis, developing in rare instances severe ophthalmopathy.
- The usual management is interferon withdrawal and high-dose corticosteroids, but it may interfere with the resolution of hepatitis. Hereby we report a case successfully treated with radiotherapy, which in our knowledge has never been previously reported.

Case Report

- A 52 year old woman was diagnosed of chronic hepatitis C (serotype 1) and began treatment with pegylated Interferon Alpha-2A (Pegasys®, 180 µg weekly) and ribavirin (1200 mg daily). After a year, she achieved clinical, biochemical and virological remission and the treatment was withdrawn.

- In the last month of antiviral treatment, the patient reported symptoms of hyperthyroidism, eyelid swelling and diplopia. TSH was suppressed and free T4 was 2.27 ng/dL (0.70 – 1.48). Tc-99m scintigraphy (image 1) showed irregular uptake with cold areas. The ultrasonography showed multinodular goiter, and the FNAC was reported as chronic lymphocytic thyroiditis (Bethesda 2).

- An orbital CT scan showed prominent enlargement of muscle and retro orbital fat with exophthalmos. The ophthalmologist recommended high-dose corticosteroid pulses, but we were concerned about the risk of hepatitis recurrence.

- The patient received standard methimazole treatment for hyperthyroidism and 10 Gy of retro orbital radiotherapy (1 Gy/fraction; 1 weekly fraction) (image 2 and 3). After the seventh session, the diplopia remitted and the patient is presently asymptomatic.

Conclusions

- Retro orbital radiotherapy should be considered as an alternative treatment for Graves-like ophthalmopathy associated to interferon treatment, avoiding the need for high-dose corticosteroids which may result in hepatitis recurrence.