The Hepatitis B Foundation’s prestigious Princeton Workshop was held on May 12-13 at the Foundation’s headquarters in Doylestown, PA, in celebration of its 20th anniversary. The assembled 23 key research leaders discussed the current state of HBV therapy and whether there is a need for new drugs.

Up to 2 million people in the U.S. are chronically infected with HBV, and as many as 70% are unaware of their infection. Of those who are recognized as having chronic HBV infection, many do not meet the current guidelines for treatment. Those for whom treatment is recommended face perhaps lifelong drug therapy, and concerns persist regarding potential long-term toxicity and drug resistance.

Participants agreed that even given the currently available HBV therapies, there is still a need for new drugs, especially ones that would not require a lifelong course of treatment. Interventions targeting all stages of the HBV lifecycle, as well as the potential role of immunomodulating drugs (e.g., therapeutic vaccines, TLR, IFN, other antiviral cytokines) were intently discussed.

Most agreed that inhibition of virus replication (i.e., nucleos(t)ide analogs) should not be a priority for drug development. New drugs should strive to achieve durable post-treatment suppression rates, but they also need to be practical, especially if they are to be used in endemic regions where health care and economic resources are often limited.