

GLECAPREVIR/PIBRENTASVIR USE IN CHRONIC HEPATITIS C: EFFECTIVENESS AND SAFETY

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BACKGROUND AND IMPORTANCE

Over the last few years have been remarkable advances in chronic hepatitis C virus (HCV) drug development, and goals of most developing regimes have been increasing sustained viral response (SVR) rates, improving tolerability and shorten treatment duration.

AIM AND OBJECTIVES

Describe use of glecaprevir/pibrentasvir in treatment of HCV patients, as well as evaluate efficacy and safety.

MATERIALS AND METHODS

Observational and retrospective study, which included all adult HCV patients who received treatment with glecaprevir/pibrentasvir between December 2017 and December 2018.

Variables collected:

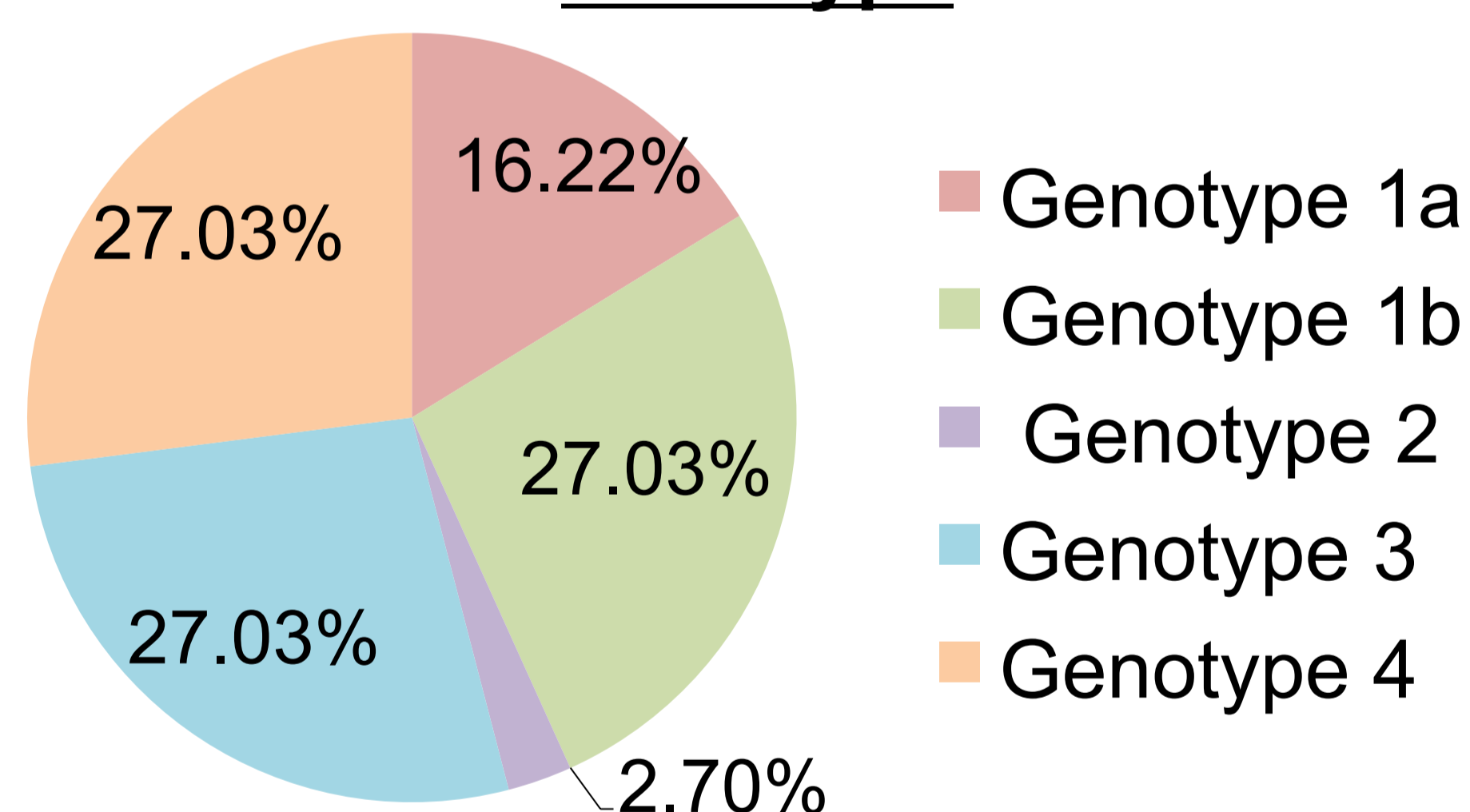
- Age
- Sex
- Genotype
- Degree of fibrosis
- Type of patient (naïve, relapsed or non-respondent)
- Prior treatment
- Treatment duration
- Basal viral load (VL)
- VL at 12 weeks after finishing treatment
- Adverse reactions

As an indicator of effectiveness, the SVR was used.

RESULTS

- 37 patients (70.27% men).
- Median age: 54 years (range 20-81).

Genotype



Treatment duration:

- 8 weeks: 28 patients (75.68%)
- 12 weeks: 6 patients (16.22%)
- 16 weeks: 3 patients (8.11%)

Median baseline VL: 1,506,164 IU/mL (range 19,800-49,033,584).

- 23 patients (62.16%) > 800,000 IU/mL

Type of patient

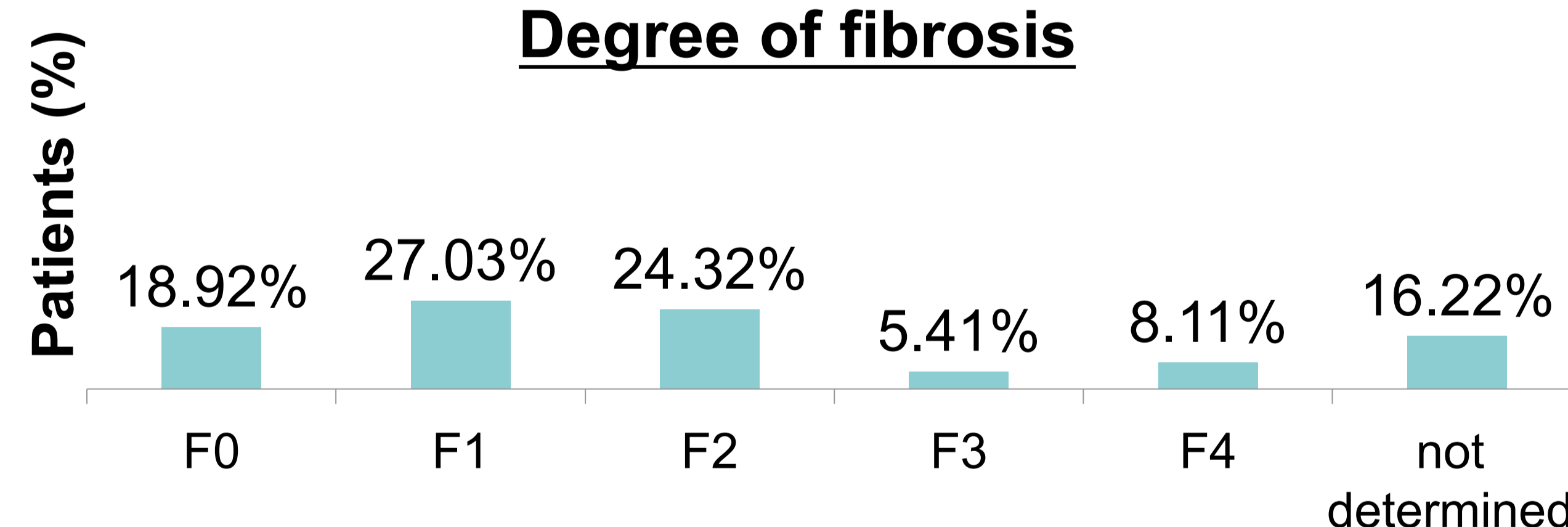
Treatment-naïve patients: 30 (81.08%).

Failed prior treatment with interferon + ribavirin: 4 (10.81%).

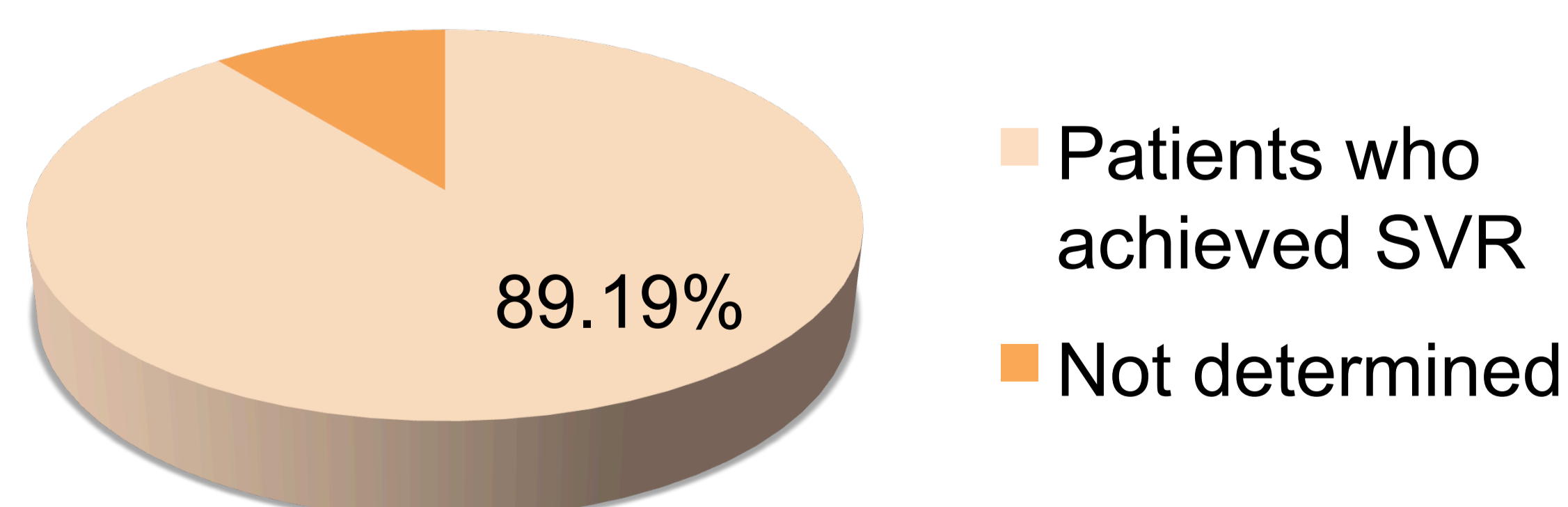
Nonresponders to treatment with direct-acting antivirals (DAA): 2 (5.40%)

Nonresponders to both interferon and DAA: 1 (2.70%)

Degree of fibrosis



Sustained Viral Response (SVR)



Adverse reactions

- Nausea (2)
- Fatigue (2)
- Gastrointestinal discomfort (2)
- Gas (1)
- Night sweats (1)
- Dry mouth (1)
- Diarrhea (1)
- Headache (1)

CONCLUSION AND RELEVANCE

- Glecaprevir/pibrentasvir represents an effective pangenotypic therapeutic option for naïve, non-responding and relapsing HCV patients, due to high percentage of patients who achieved SVR.
- Most of adverse reactions reported were similar to those described in clinical trials, all of them being mild, and did not require interruption of treatment.

