EVALUATION OF PATIENT, VIRUS AND TREATMENT BASELINE FACTORS AFFECTING THE EFFECTIVENESS OF DIRECT ANTIVIRAL AGENTS AGAINST THE HEPATITIS C VIRUS

Margusino-Framiñán L1, Cid-Silva P1, Mondelo-García C1, Castro-Iglesias A2, Otero-Ferreiro A3, Pértega-Díaz S4, Suárez-López S2, Vázquez-Millán MA3, Rodríguez-Osorio I2, Martín Herranz MI.

1Pharmacy. 2Internal Medicine. 3Liver transplantation. 4Epidemiology. Instituto de Investigación Biomédica de A Coruña (INIBIC), Complexo Hospitalario Universitario de A Coruña (CHUAC), Sergas. Universidade da Coruña (UDC). As Xubias, 84. 15006 A Coruña, Spain.

Background

- Chronic Hepatitis C (CHC) treatment has radically changed with the commercialization of direct-acting antivirals (DAAs) for hepatitis C virus (HCV) with high levels of safety and effectiveness.

- Available data from clinical trials reveal that baseline factors at the beginning of treatment which can influence treatment results are basically:
  Viral genotype, Previous treatments (naive or pretreated), Baseline viral load, Degree of fibrosis

Objective

To identify patient, virus or treatment baseline factors which can influence antiviral treatment effectiveness obtained with DAAs in real clinical practice.

Methods

Prospective observational study of patients with CHC who initiated and completed antiviral treatment for 12 or 24 weeks, between 1st April 2015 and 1st January 2017

Exclusion criteria: Patients from penitentiary centres.

Main variable: sustained virological response (SVR12).

Covariates: gender, age, HIV coinfection, previous treatment, liver transplantation, cirrhosis, fibrosis, viral genotype, baseline viral load and antiviral treatment.

Statistical method: descriptive analysis comparing patients with SVR12 and patients with relapse. Statistical signification was calculated with the Fisher exact test and Mann-Whitney test.

Ethics: this Study was authorised by the Health System Investigation Committee

Results

- 798 patients
- Mean age: 58 ± 12 years-old
- 63.4% men
- 14% HIV coinfected
- 4.7% liver transplantation
- Median basal viral load: 1,475,595 UI/mL
- 83% DAAs treatment for 12 weeks

None of the analyzed basal covariates significantly influences SVR12, except gender (p=0.03), since all the relapsers were men.

The lowest SVR12 were obtained for genotype 3 (96.9%) and for sofosbuvir/daclatasvir (95,9%)

Conclusions

- This prospective study in a large population of patients demonstrates the high effectiveness of treatment with DAAs against HCV in real clinical practice.
- Neither genotype, nor baseline viral load, nor degree of fibrosis, nor previous treatments nor any other variable except gender, have had influenced on SVR12.