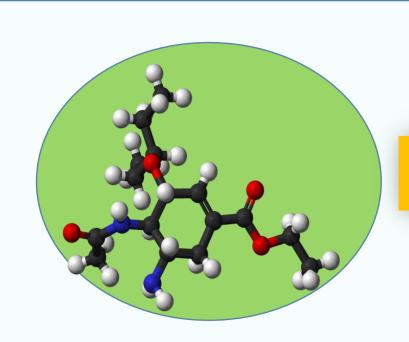
CP-035 EVALUATION OF THE THERAPEUTIC STRATEGIES USED FOR THE TREATMENT OF THE HEPATITIS C VIRUS GENOTYPE 3



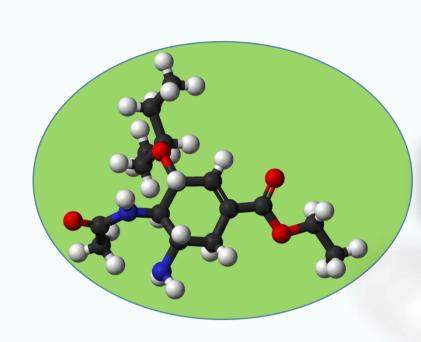
INFECTION

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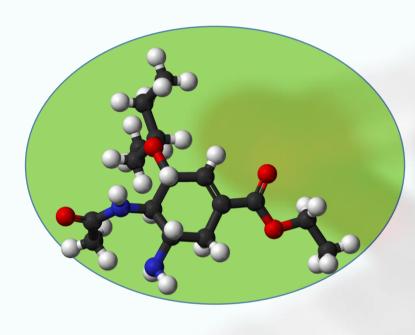
BACKGROUND

Hepatitis C is a serious health problem with high prevalence rates, being the leading cause of liver transplantation. The development of well tolerated and highly effective direct active antivirals (DAAs) for hepatitis C virus (HCV) dramatically changed the therapeutic landscape.



PURPOSE

To assess the effectiveness of sosbuvir/daclatasvir (SOF+DCV) compared to sofosbuvir/ledipasvir (SOF/LDV) used for the treatment of the hepatitis C virus genotype-3 infection.



MATERIAL AND METHODS

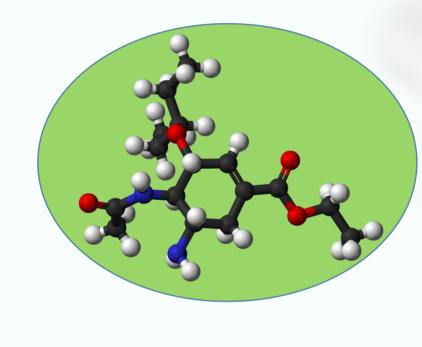
Retrospective and observational study between April 2015 and January 2016.

Inclusion criteria: → Patients with HCV genotype-3 infection treated with SOF/LDV±Ribavirin (RBV) or with SOF+DCV during study period.
Outcomes collected: → Demographics: age and sex.

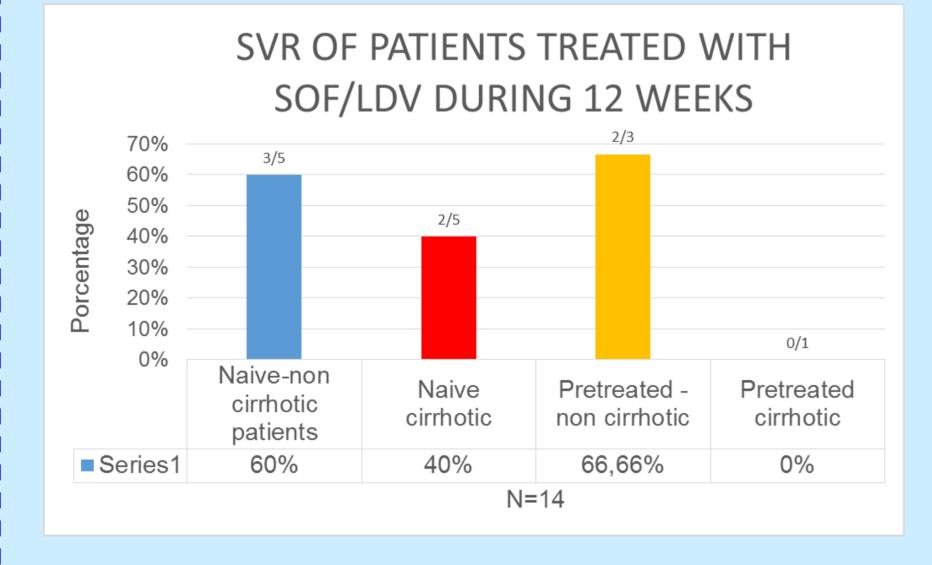
Clinical data: basal viral load (VL) METAVIR score: F0-F4. Liver transplant. HIV co-infection

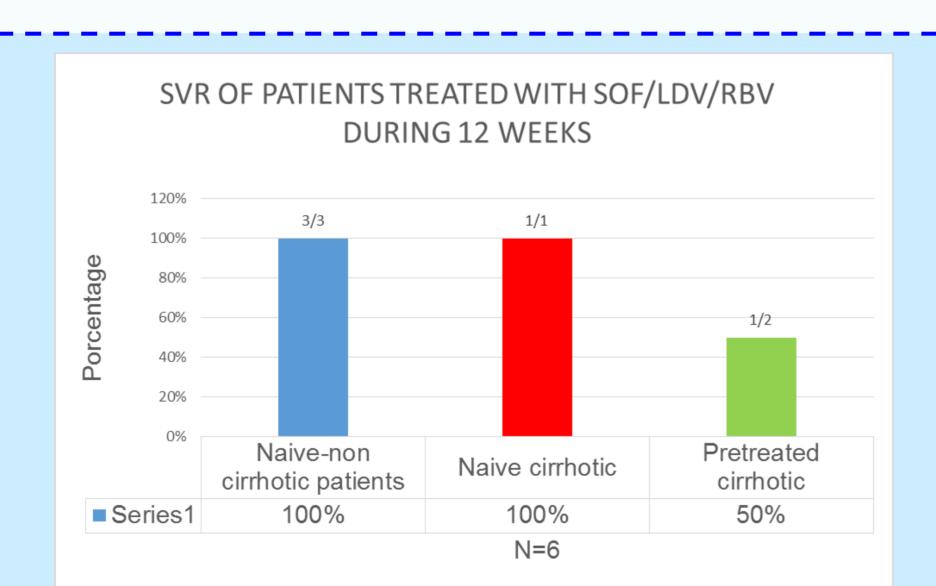
SVR at week 12 (SVR12), defined as HCV RNA titres lower than 15 IU/mL. Previous treatments for HCV.

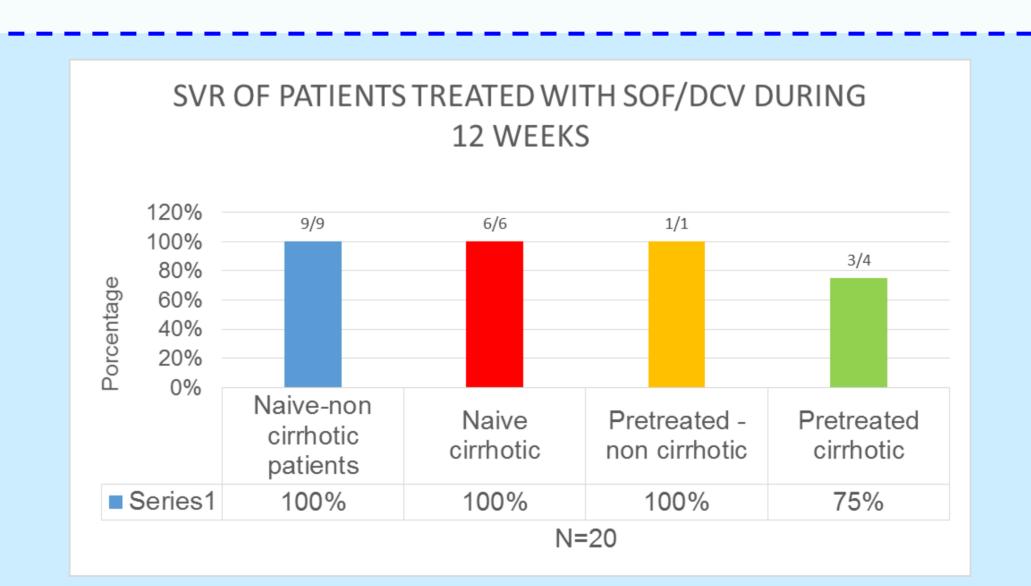
Data were collected from the medical records of patients.



RESULTS

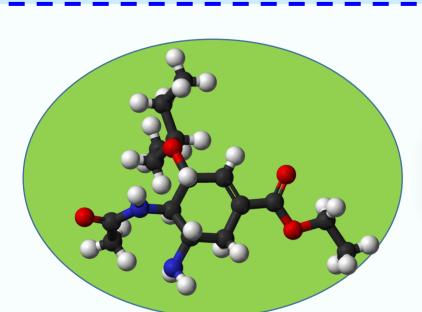






Treatment with SOF/LDV±RBV: 20 patients were included (65% male) with mean age of 53.05±9.05 years. Patients were treated 12 weeks. According to METAVIR score: F4 (cirrhosis) (45%), F3 (35%), F2 (15%), F1 (5%). 10% of Patients were HIV-coinfected, 15% had a liver transplant and 30% were pretreated with RBV/peginterferon. 45% of patients had an initial VL>800.000UI/ml.

20 patients (85% male) were included with mean age of 53.05±9.05 years. Patients were treated 12 weeks. According to METAVIR score: F4 (cirrhosis) 50%, F3 (20%), F2 (20%), F1 (10%).HIV-coinfected patients 45%, pretreated with RBV/peginterferon 25% and 30% had basal VL>800,000UI/ml.



CONCLUSION

Treatment with SOF+DCV seems to be more effective in our study. This matches the upper SVR12 rate achieved in ALLY-3 for SOF+DCV compared with results obtained in ELECTRON-2 for SOF/LDV in genotype 3, although the sample size and different baseline characteristics of the patients could be influencing these results..

ACKNOWLEDGEMENTS

No conflict of interest

J05- ANTIVIRALS FOR SYSTEMIC USE