



# EFFECTIVENESS AND SAFETY IN THE USE OF SOFOSBUBIR/VELPATASVIR IN THE TREATMENT OF CHRONIC HEPATITIS C VIRUS INFECTION

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## BACKGROUND & IMPORTANCE

Hepatitis C virus (HCV) causes chronic infection in 55-85% of patients, increases the risk of liver cirrhosis to 15-30% in 20 years and is the main cause of hepatocellular carcinoma (70-80%) in Spain.

## AIM & OBJECTIVES

To evaluate the effectiveness, safety and drug interaction profile of sofosbuvir/velpatasvir in patients with chronic HCV.

## MATERIALS AND METHODS

Observational and retrospective study. Jan 2019 - Jul 2023

Included: all HCV patients treated with sofosbuvir/velpatasvir.

Variables:

- Sex and age at baseline.
- Baseline: viral load (VL) at baseline (VL0), HCV genotype, degree of fibrosis, co-infection with Human Immunodeficiency Virus (HIV).
- Treatments: previous treatments, combination with ribavirin and potential drug interactions with concomitant treatment.
- Results: VL at the end of treatment (VLEnd) and at 12 and 24 weeks after completion (VL12 and VL24), sustained viral response (SVR) was defined as undetectable VL12/VL24 (SVR12/SVR24).
- Adverse reactions (ARs) reported by patients.

## CONCLUSION AND RELEVANCE

- Sofosbuvir/velpatasvir is an effective and safe therapy for the treatment of HCV infection.
- The potential drug-drug interactions of DAAs highlight the importance of pharmaceutical care in this group of patients

## RESULTS

- 80 patients, 70.0% (N=56) were men.
- Median age: 53,8 years (IQR:49,0-58,8).
- 10,0%(N=8) of patients have received interferon or interferon+ribavirin.
- 8,8%(N=7) had HIV coinfection.
- The association with ribavirin was used in 7,5% of patients (N=6).
- SVR12 was achieved in 96,7% of patients (N=58) and all maintain response an SVR24.
- 36,3%(N=29) of patients were identified with potential drug interactions and 37,5%(N=30) of patients reported AR.

