DIRECT-ACTING ANTIVIRALS FOR THE TREATMENT OF HEPATITIS C VIRUS INFECTION: A REAL-WORLD DATA







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PURPOSE

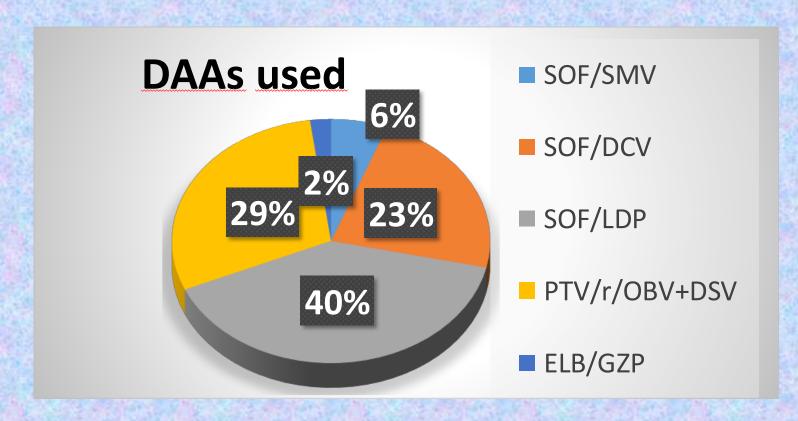
Evaluate Direct Acting Antivirals (DAAs) real life effectiveness and safety in mono-infected HCV patients.

MATERIAL AND METHOD

Observational, retrospective and analytical study, involving mono-infected HCV patients treated with DAAs since April-2016 in a teaching general hospital. Demographic variables, genotype, liver fibrosis, treatment naïve or not, DAAs combination, treatment duration, and sustained viral response at week 12 posttreatment (SVR-12) were obtained from Electronic Health Record. Data were collected in Excel® 2010 and statistical intention to treat analysis was performed with SPSS®v21.

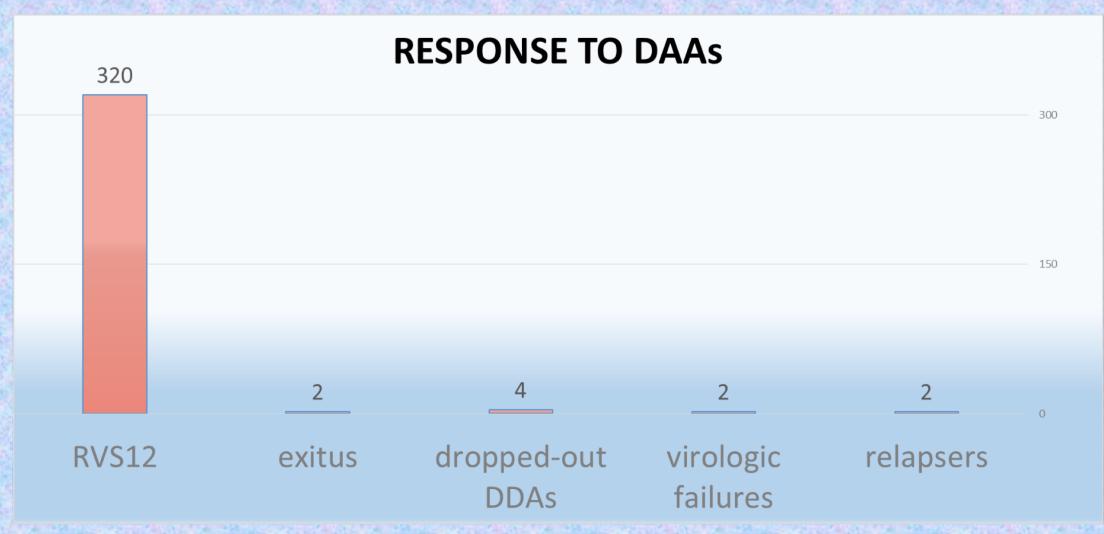
RESULTS

- √ 330 Patients have been treated with DAAs
- √ 42,64 % woman, mean age 58,62 years (22-85)
- ✓ 24.85%(82) interferon pretreated (50 no responders-NR, 32 relapses-RR)



FIBROSIS	
F1	6,06%
F2	29,69%
F3	19,70%
F4	37,58%
undeterminated	4,24%

GENOTYPE	
G1a	48,79%
G1b	42,12%
G1c	0,30%
G2	0,61%
G3	4,85%
G4	3,03%
G5	0,30%



SVR12 according to DAAs used

DAAs	N° patients
EBV/GZP	100% (7)
PAR/OMB+DAS	96.90%(94)
SOF+LDP	96.96%(128)
SOF+DAC	97.33%(73)
SOF+SMP	94.74%(1)

CONCLUSIONS

High SVR12 rates has been achieved in real world setting, similar data to those clinical trials. Virological failures and relapsers were due to wrong genotyped assignment. Therapeutic drop-outs were caused by specific individual factors, such as social problems and acute processes that caused DAAs discontinuation. Even so, new generation of DAAs leads to better tolerance. These results suggest that eradication of HCV is feasible, carrying out a good screening strategy and high treatment access.