



FOR THE TREATMENTOF HEPATITIS C VIRUS IN CLINICAL PRACTICE

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Background:

Given the large number of new drugs for the treatment of hepatitis C virus (HCV) and the high economic cost, it is important to decide which treatment is best suited to each patient.

Purpose:

To evaluate the efficacy of triple therapy with protease inhibitors for the treatment of HCV in clinical practice.

Material and methods:

Two-year retrospective study including all patients treated with triple therapy for HCV. Analyzed parameters were: sex, age, HCV genotype, liver fibrosis, type of patient (pretreated / naive) HIV co-infection and HCV viral load (VL).

The collected data were obtained by reviewing medical records, and Savac® prescription and validation program

Results: 26 patients



Median age: 52 yeas

Genotype: 1a 11 (42%) 1b 15 (58%)

The most common liver fibrosis was grade 3

After finishing the treatment, 23 patients had undetectable viral load (one of the patients presented detectable viral load at week 4 and two of them at week 12). Twenty-four weeks after the treatment, 22 of them had sustained viral response (SVR). In the table we can see the response rates based on the drug and/or patient characteristics

	Nº of patients	Week 4	Week 12	Week 24	Week 48	SVR
Total	26	96,15%	92,31%	92,31%	88,46%	84,62%
Telaprevir	19	94,74%	89,47%	89,47%	89,47%	84,21%
Boceprevir	7	100%	100%	100%	85,71%	85,71%
Naive	10	100%	100%	100%	90%	90%
Previously-treated	16	93,75%	87,50%	87,50%	87,50%	81,25%
Relapsers	8	100%	100%	100%	100%	100%
Partial response	7	87,50%	75,00%	75,00%	75,00%	62,50%
Null responders	1	100%	100%	100%	100%	100%

Conclusion:

The triple therapy treatment is a highly effective treatment that gets a SVR in most patients.