

*7th Paris Hepatitis Conference, January 13-14 2014*

**How to optimize current therapy of G1 patients**

**Is there still a role for PEG IFN+RBV therapy?**

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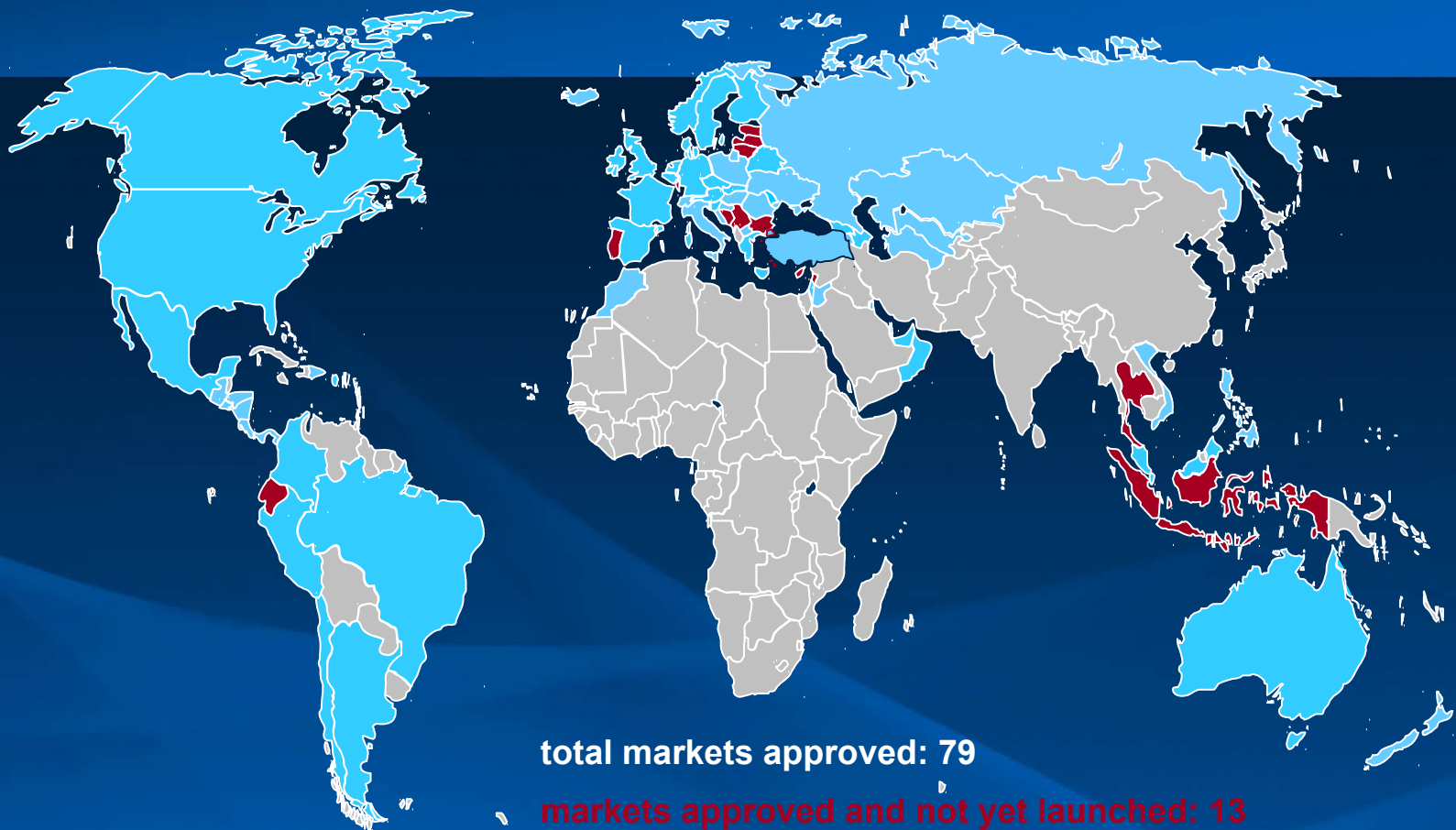


# Triple therapy is the standard of care for treatment of HCV 1 patients

- Compared to dual therapy with PEG/RBV :
  - Higher rate of side effects
  - Viral resistance
  - Increased cost
- Not available in all countries

# VICTRELIS APPROVALS & LAUNCHES

December 31, 2013



total markets approved: 79

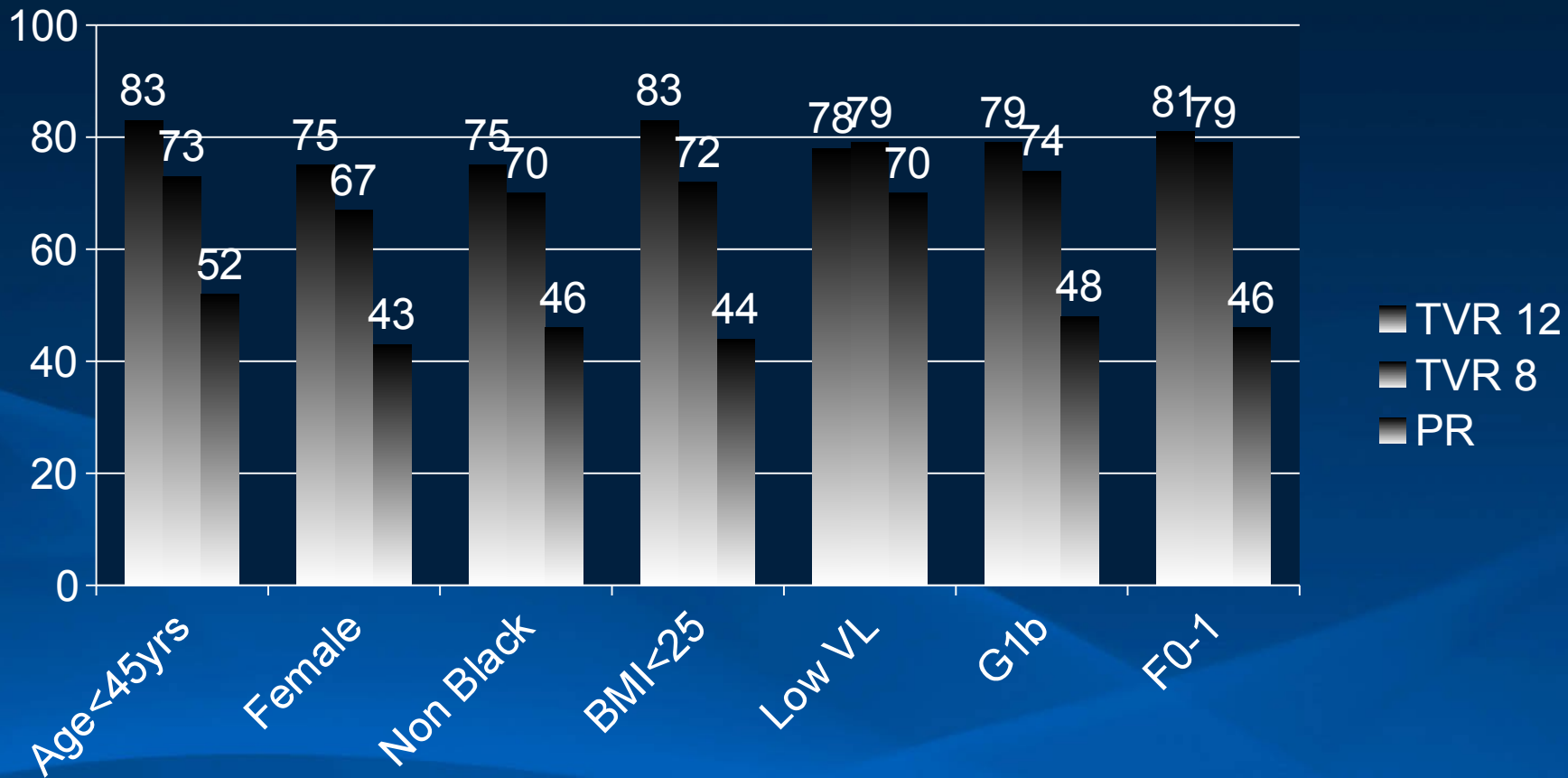
markets approved and not yet launched: 13

markets approved and launched: 66, (13 in 2011, 25 in 2012, 28 in 2013)

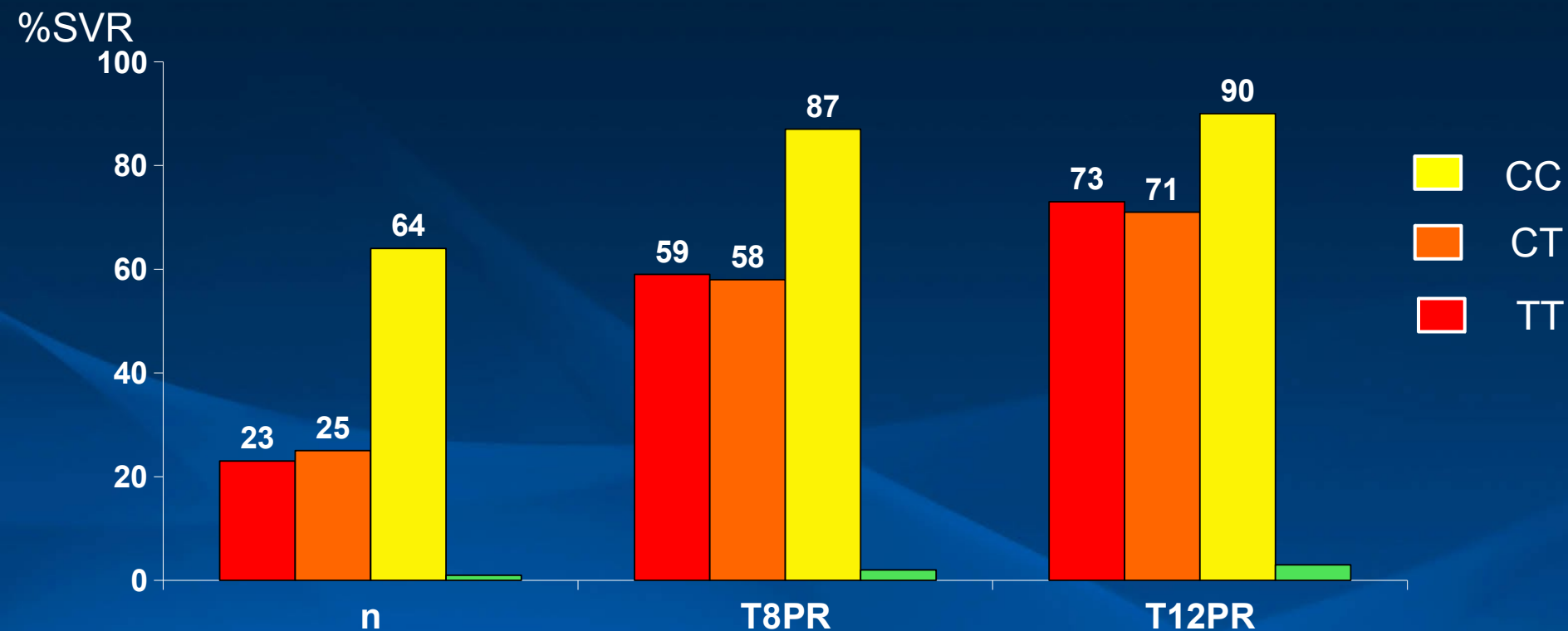
# PEG/RBV in G1 patients: which profile ?

- Baseline predictors
- Viral kinetic

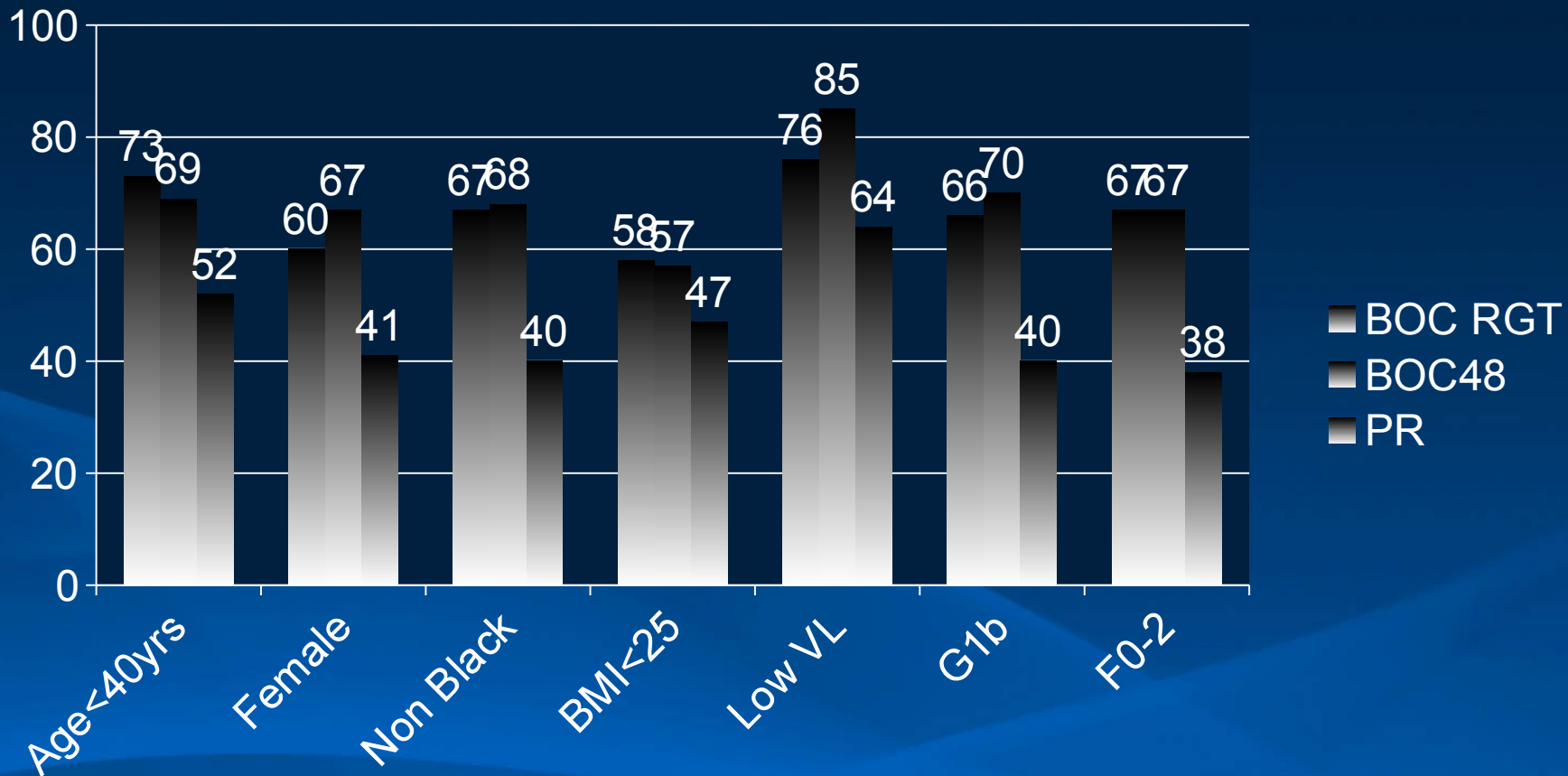
# PR vs TVR: SVR rate according to baseline predictors in naïve patients (*ADVANCE*)



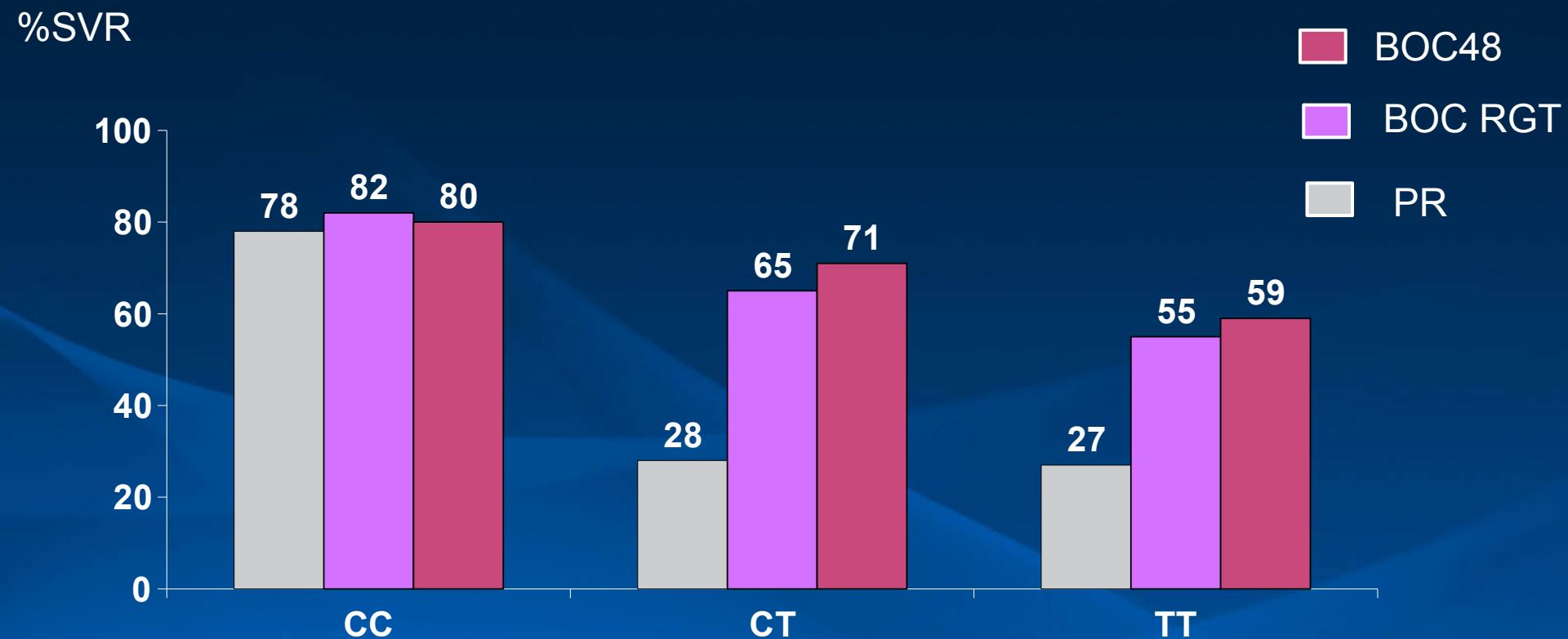
# PR vs TVR: SVR rate according to IL28B in naïve patients (*ADVANCE*)



# PR vs BOC: SVR rate according to baseline predictors in naive patients (SPRINT-2)



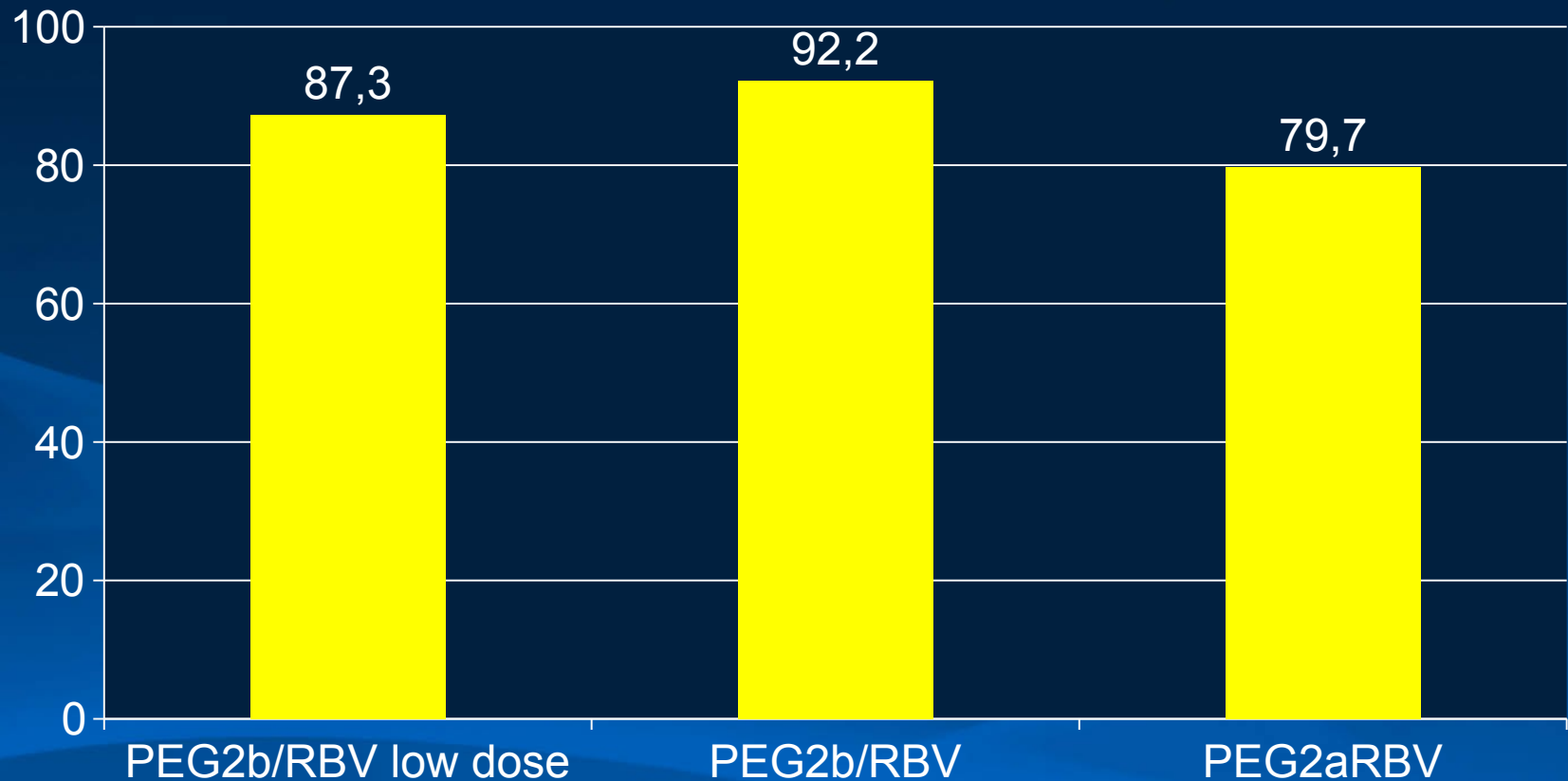
# PR vs BOC: SVR rate according to IL28B in naïve patients (*SPRINT-2*)





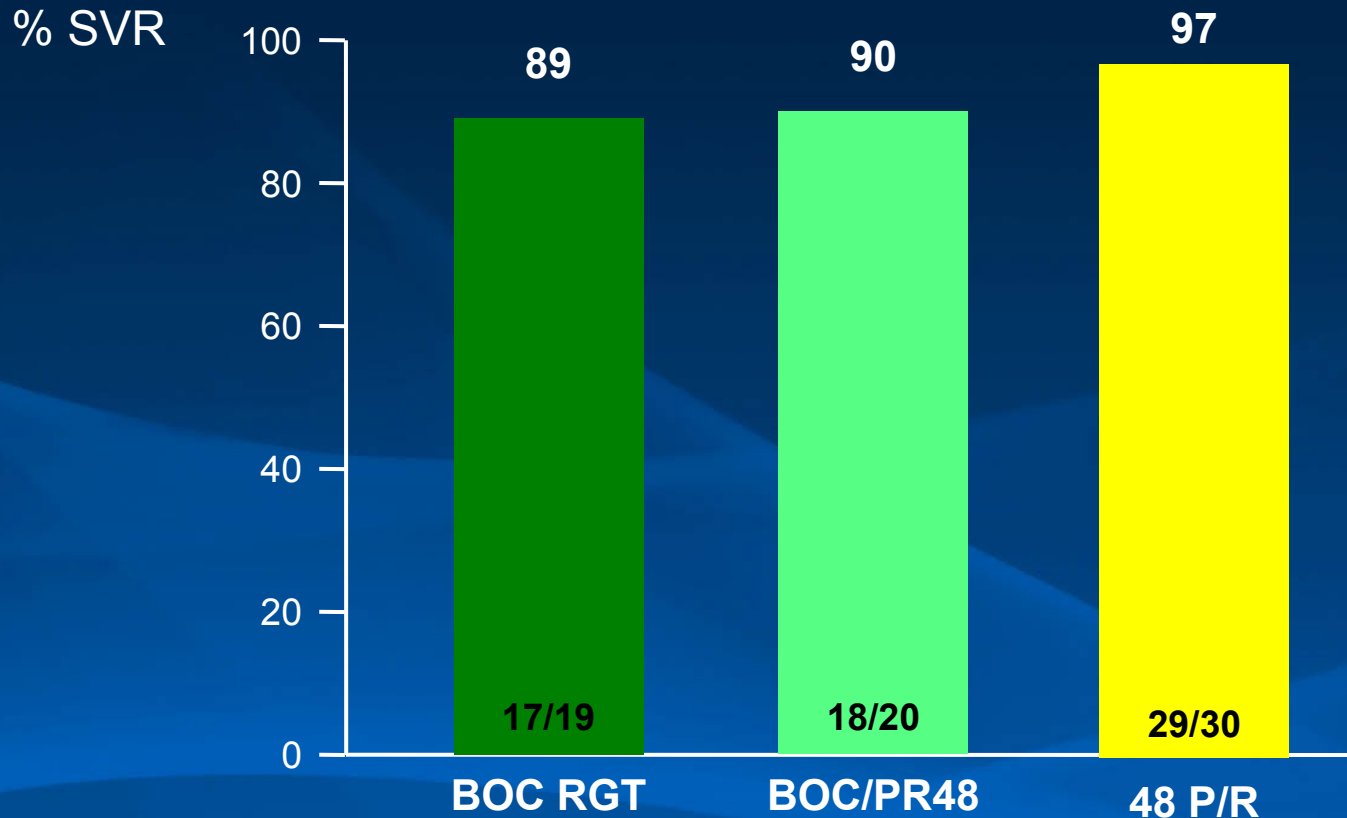
# PEG/RBV: high rate of SVR in naïve patients with RVR

IDEAL study: 318/3070 (10.3%) patients with RVR



# High rate of SVR in patients with negative HCV RNA at W4 of lead-in (*SPRINT-2*)

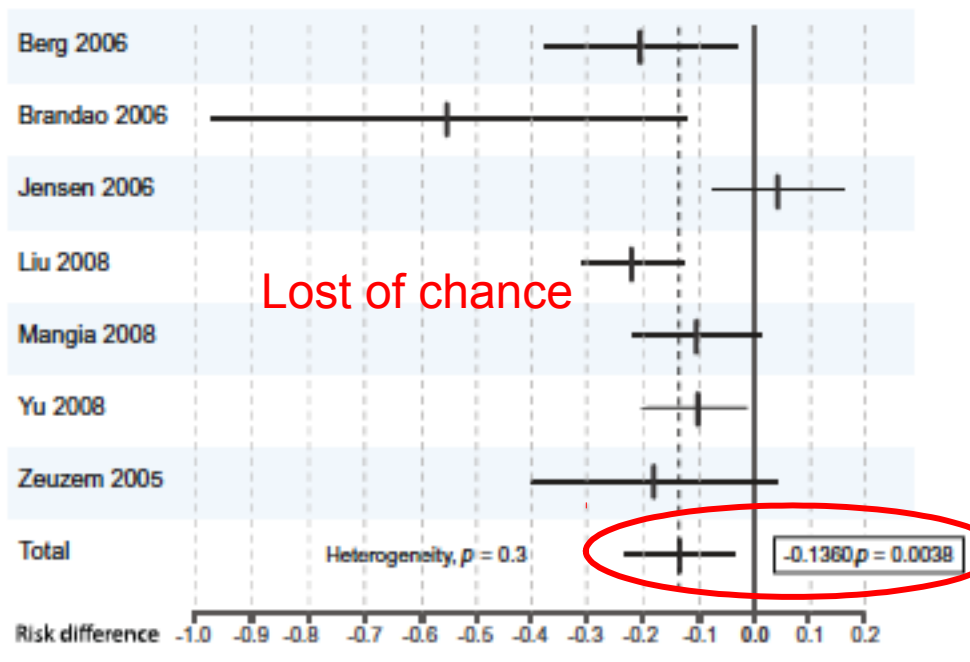
Patients with RVR



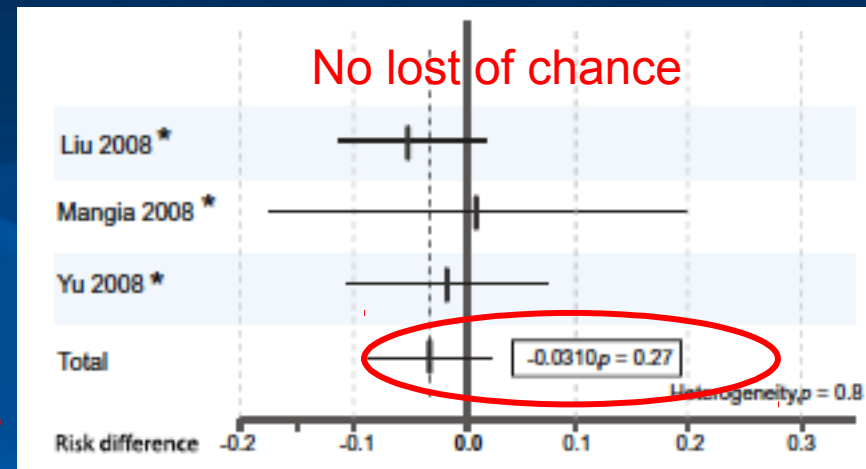
# Short duration treatment with PEG/RBV in G1 patients with RVR: metaanalysis

## PEG/RBV 24 weeks versus 48 weeks

G1 patients with RVR

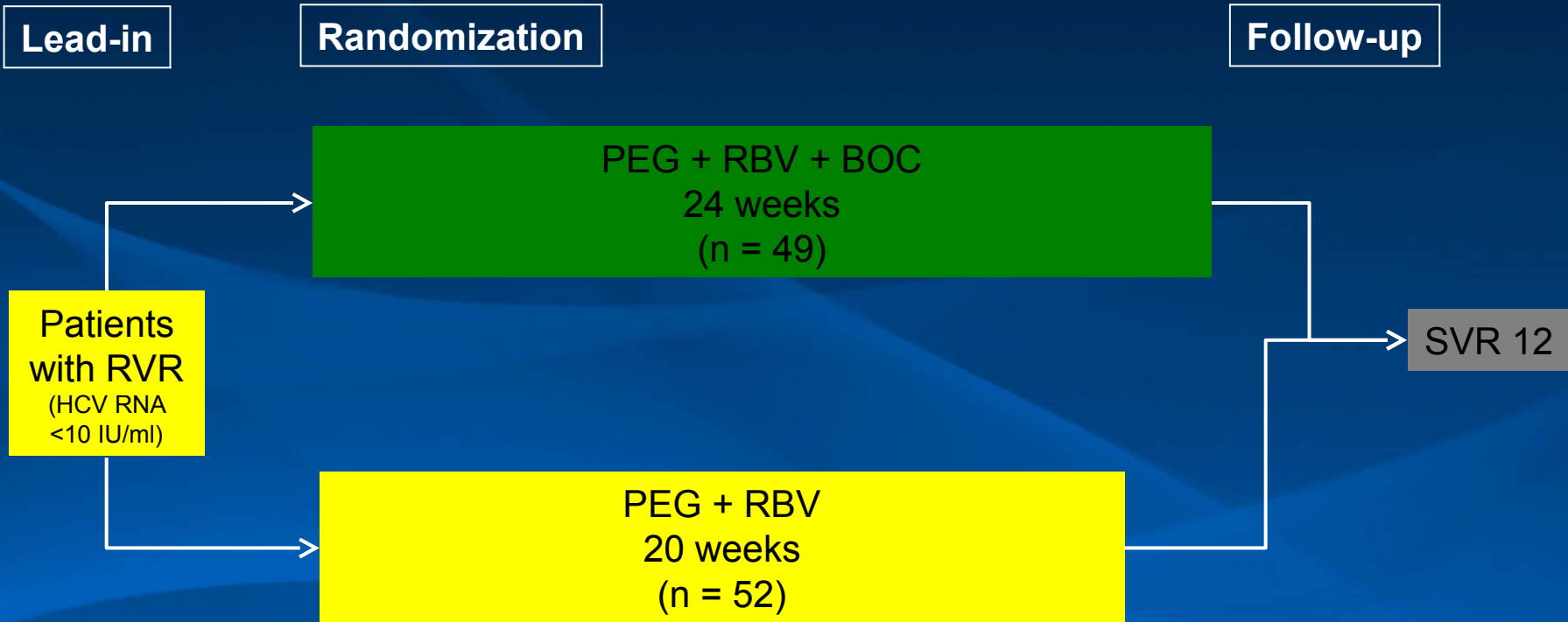


G1 patients with RVR and low VL at baseline (<400 000 IU/ml)



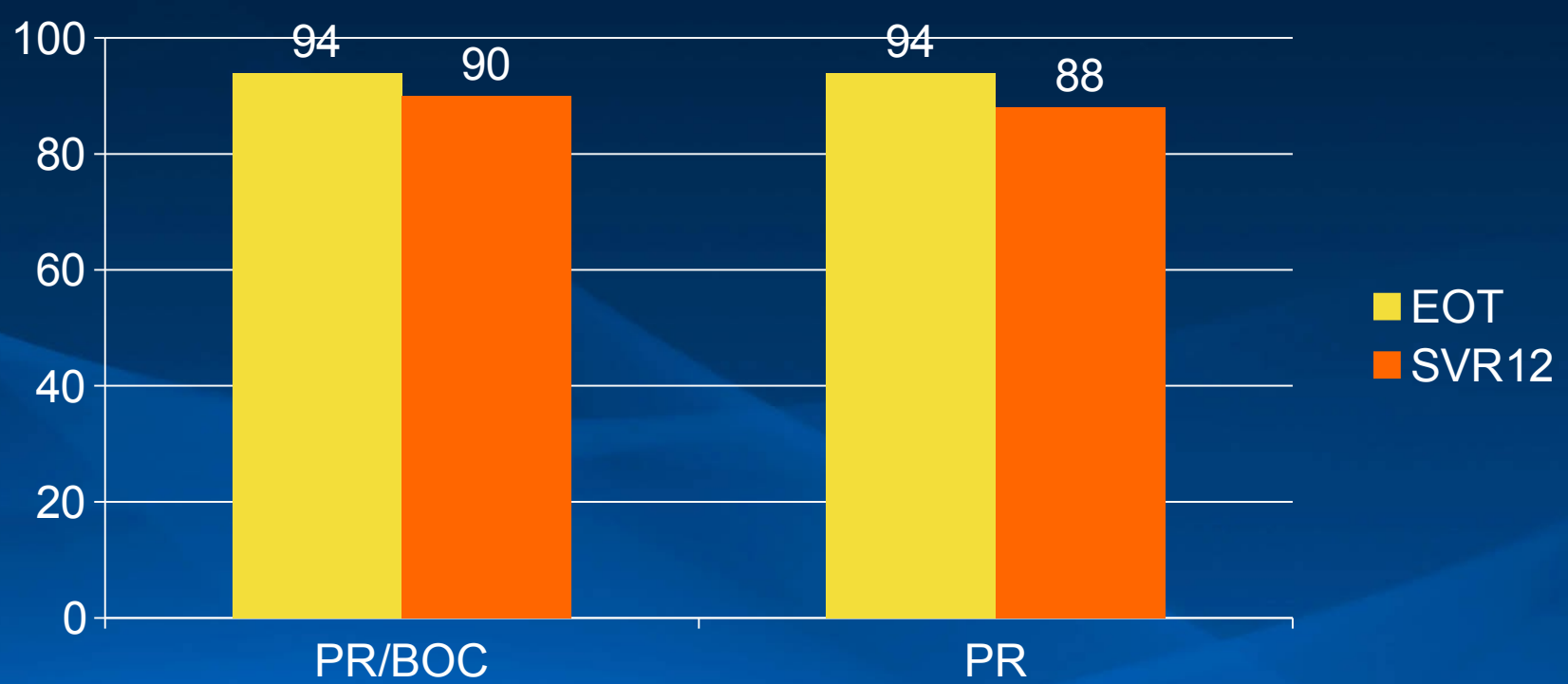
# PEG/RBV versus PEG/RBV/BOC in patients with low VL and RVR

233 G1 non-cirrhotic patients naïve of treatment with low VL at baseline (< 600 000 IU/ml)  
→ 112 (48%) with RVR → 101 randomized

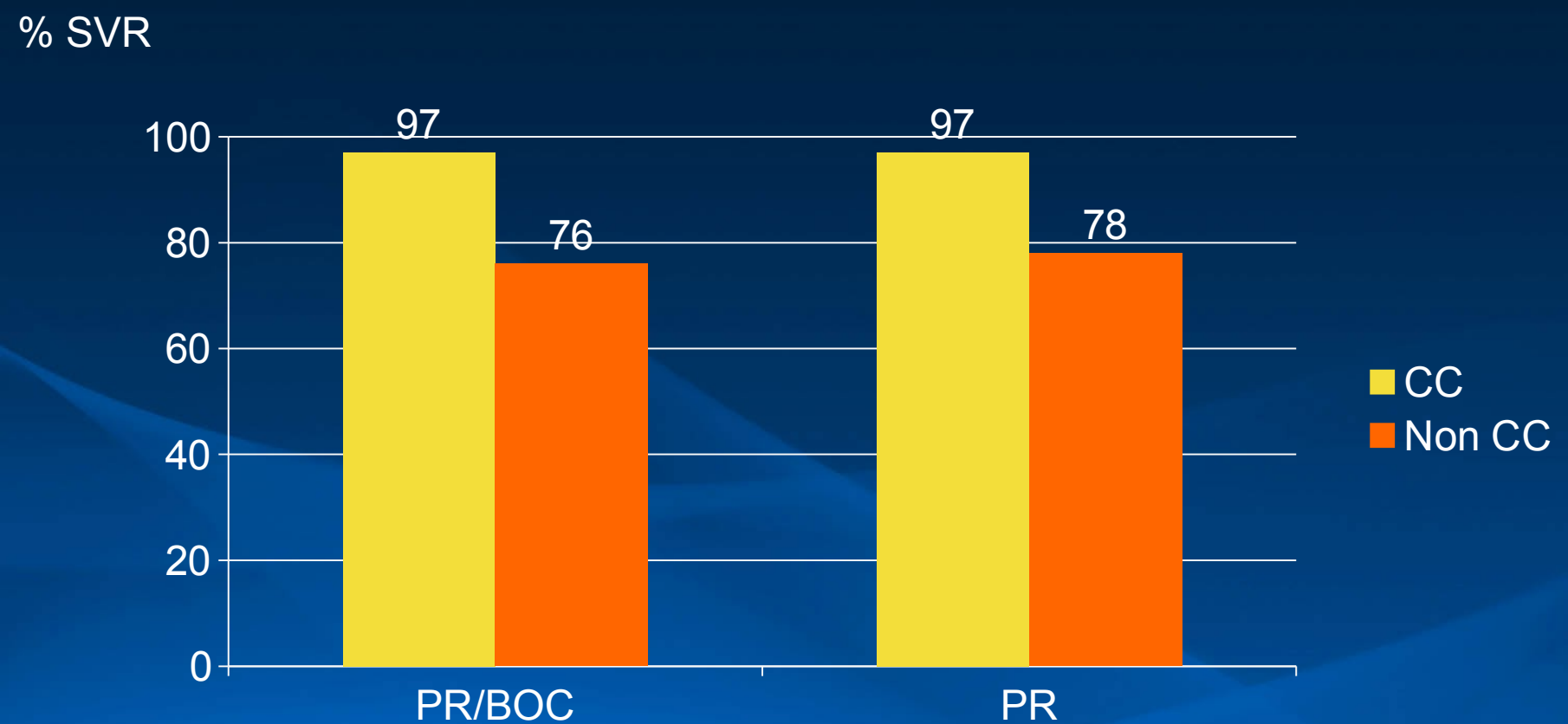


# PEG/RBV versus PEG/RBV/BOC: efficacy

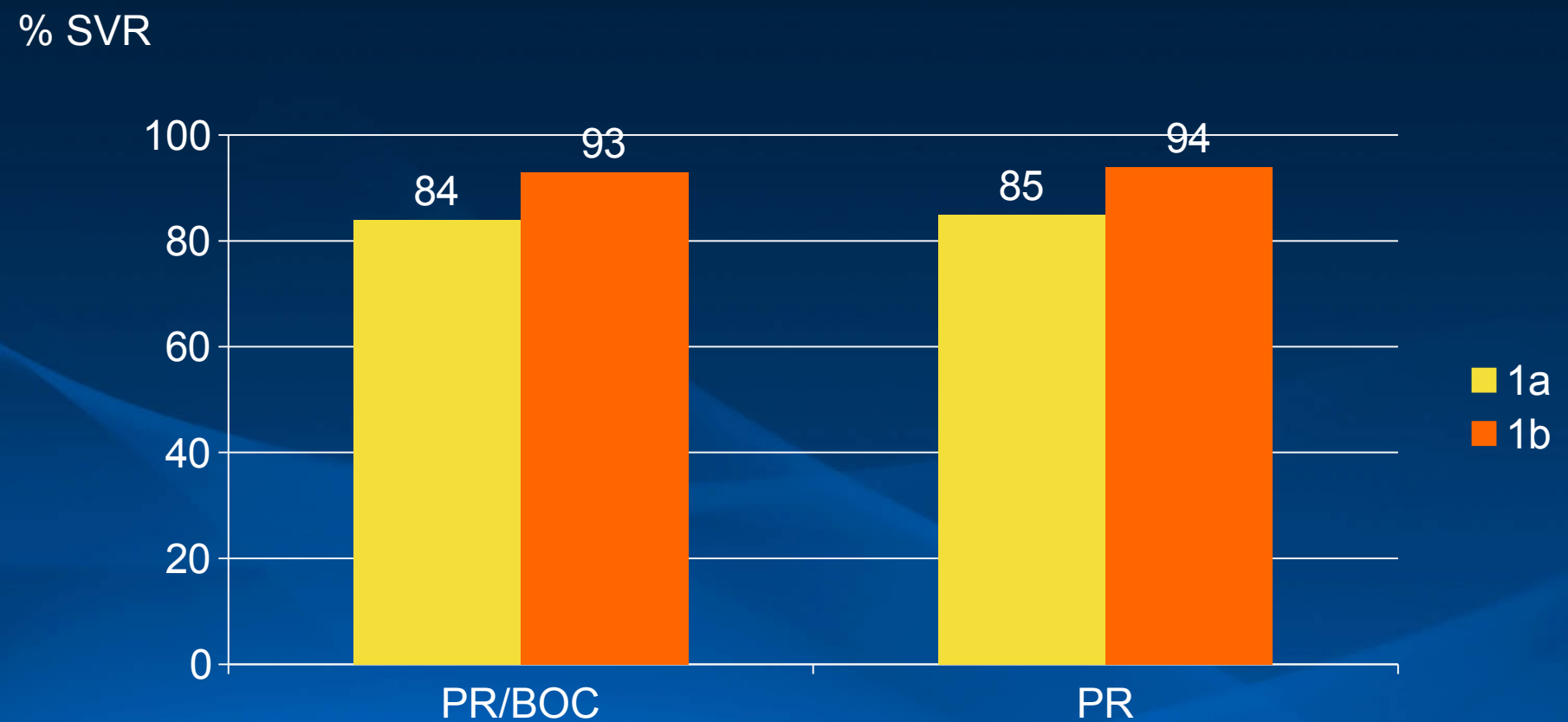
% SVR



# SVR rates according to baseline predictors



# SVR rates according to baseline predictors



# What is the prevalence of G1 patients with low viral load at baseline and RVR ?

Genotype 1 patients naïve of treatment



Low viral load (<600 000 IU/ml) 20-25%



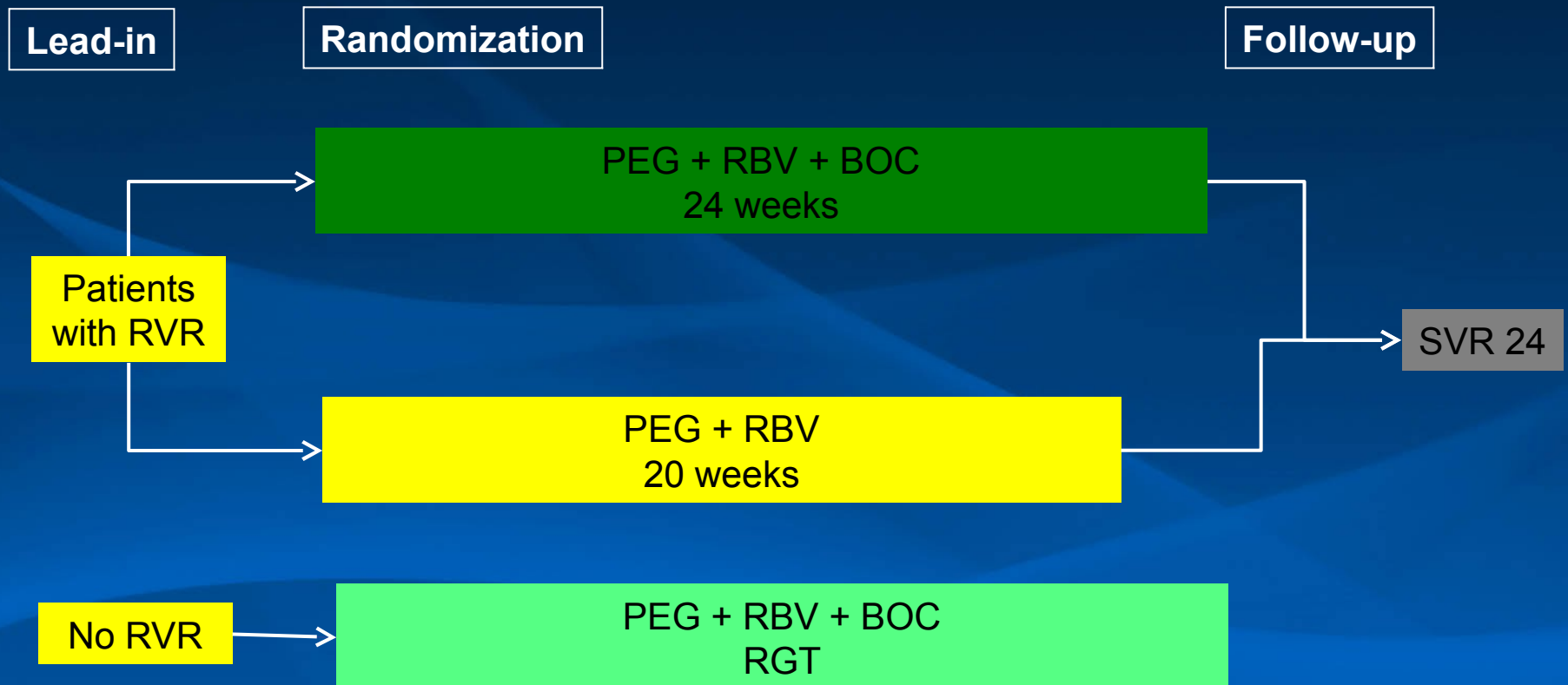
RVR 50%

**10-15% of patients eligible for PEG/RBV**

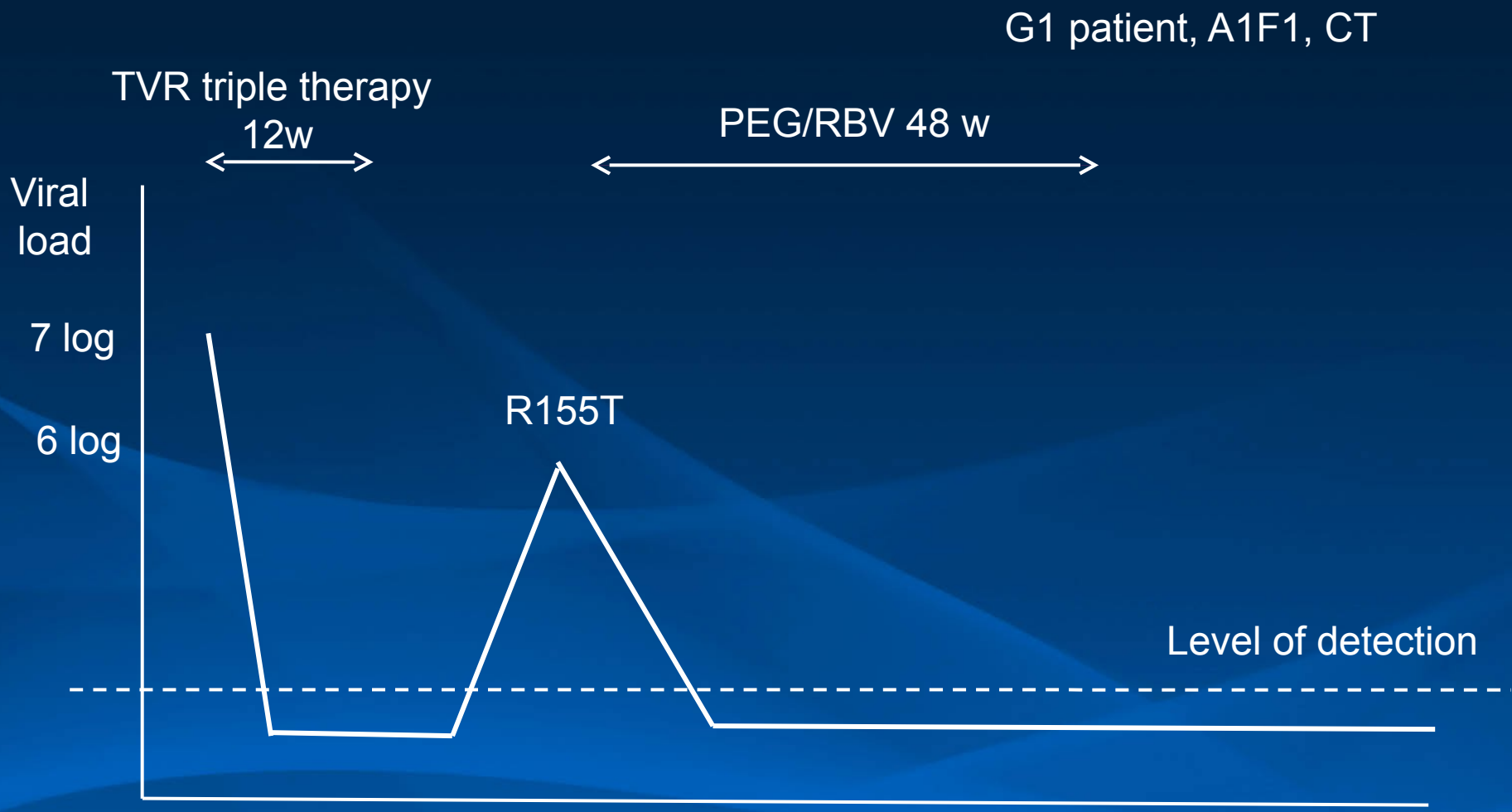


# PEG/RBV *versus* PEG/RBV/BOC in IL28B CC patients with RVR (*on going trial*)

*1250 G1 patients naïve of treatment with IL28B CC genotype*



# PEG/RBV in treatment experienced patients ?



# Place of PEG + RBV in G1 patients naïve of treatment ?

Non cirrhotic with low baseline VL (<600 000UI/ml)

PEG/RBV

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graph TD; A[PEG/RBV] --> B[Undetectable HCV RNA (50%)]; A --> C[Detectable HCV RNA]; B --> D[PEG/RBV 20 weeks]; C --> E[Triple therapy];
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W4

Undetectable HCV RNA (50%)

Detectable HCV RNA

PEG/RBV 20 weeks

Triple therapy

# PEG/RBV in the era of second wave DAAs ?

Simeprevir-based  
triple therapy

24/48w

Sofosbuvir-based  
triple therapy

12w

IFN free regimen

PEG/RBV

Faldaprevir-based  
triple therapy

Daclatasvir-based  
triple therapy

