DRUG USE AND REINFECTION DURING AND FOLLOWING HCV TREATMENT WITH ELBASVIR/GRAZOPREVIR AMONG PATIENTS RECEIVING OPIOID AGONIST THERAPY: FINAL RESULTS FROM THE CO-STAR STUDY

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BACKGROUND / AIM

- CO-STAR: evaluation of elbasvir/grazoprevir 12 weeks in PWID receiving OAT¹
- CO-STAR Part A
 - Phase 3, randomized, placebo-controlled
 - HCV GT1, 4, or 6 infection on OAT for \geq 3 months
 - 45% with positive Urinary Drug Screen at baseline*
 - 97% of participants with >95% adherence
- CO-STAR Part B
 - A 3-year long term follow-up study to evaluate HCV reinfection and injecting risk behaviours in people from CO-STAR Part A



RISK BEHAVIOUR: REPORTED DRUG USE AND URINE DRUG SCREEN



•FDGE

CO-STAR

*Includes heroin, cocaine, amphetamine, other opiate or benzodiazepine injection drug use at any time in the previous 6 months [†]UDS data are based on n values of 190, 177, 172, 152, 143, and 137 for the 6, 12, 18, 24, 30 and 36 month follow-up visits, respectively

INCIDENCE OF REINFECTION



[†]Of these 6 reinfections, 3 occurred during Part A and 3 occurred during Part B

^{*}Includes 191 patients who provided a response regarding drug use in at least 1 AQB questionnaire



CONCLUSIONS

- Drug use patterns reasonably stable through 36 months follow-up
 - 23-31% of people reported injection drug use in the previous 6 months
- Overall reinfection rate of 1.7/100 person-years (py)
 - Reinfection rate 2.2/100 py among those with reported injection drug use
 - Higher number of reinfection cases in early follow-up period: more frequent follow-up?
- Of the 10 participants with reinfection
 - 8 had persistent reinfection
 - 4 were re-treated outside of the clinical trial
 - 2 had spontaneous clearance
 - 1 had a second reinfection: first reinfection at FW8, after spontaneous clearance, 2nd reinfection detected at 30M follow-up visit
- HCV reinfection monitoring and retreatment a key component of HCV elimination

