

REAL-WORLD OUTCOMES IN PATIENTS WITH CHRONIC HEPATITIS C VIRUS INFECTION WITH OPIOID SUBSTITUTION THERAPY, MENTAL DISORDERS, OR ALCOHOL USE DISORDER TREATED WITH GLECAPREVIR/PIBRENTASVIR: DATA FROM THE GERMAN HEPATITIS C-REGISTRY

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Background: Glecaprevir/pibrentasvir (G/P) is approved to treat chronic hepatitis C virus (HCV) infection. Real-world data on patient-reported outcomes (PROs) are limited in key subgroups for achieving HCV elimination including patients on opioid substitution therapy (OST) and patients with mental disorders or alcohol use disorder (AUD). We report real-world data on the effectiveness and safety of G/P and PROs in these key subgroups within the German Hepatitis C-Registry (DHC-R).

Methods: The DHC-R is an ongoing, non-interventional, multicenter, prospective, observational cohort study. Data were collected 2 August 2017–20 January 2019 for patients treated with G/P on-label. The primary endpoint was sustained virologic response at post-treatment week 12 (SVR12), assessed in patients who received ≥ 1 dose of G/P. Safety and PROs were also assessed.

Results: Of 1698 patients, 439 (26%) were on OST, 247 (15%) had mental disorders, and 106 (6%) had AUD. The majority were HCV treatment-naïve (89%) and without cirrhosis (93%). In the intention-to-treat population, the SVR12 rate was: overall, 96.6% (964/998); OST, 94.4% (218/231); mental disorders, 97.1% (136/140); AUD, 96.7% (58/60). Three patients had G/P-related serious adverse events (AEs); 3 patients discontinued G/P due to AEs (nausea; diarrhea; vomiting). Patients in these subgroups reported lower baseline SF-36 physical and mental component summary (PCS and MCS) scores and greater improvements in these scores than patients without these characteristics. The mean change in PCS and MCS scores from baseline to post-treatment week 12 was: overall (N=236), 1.6 and 4.7; OST (N=56), 1.8 and 6.1; mental disorders (N=40), 2.3 and 4.9; AUD (N=22), 1.9 and -0.4.

Conclusion: In the real world, G/P treatment led to improvements in SF-36 component scores; the greatest improvements were observed in patients on OST or patients with mental disorders, suggesting these patients may benefit most from treatment. Updated data for effectiveness, safety, and PROs will be presented.

Disclosure of Interest Statement:

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