C-EDGE CO-STAR: INTERIM RESULTS FROM THE 3-YEAR FOLLOW-UP TRIAL RISK FACTORS AND RATE OF REINFECTION IN PARTICIPANTS ON OPIATE AGONIST THERAPY PREVIOUSLY TREATED WITH ELBASVIR/GRAZOPREVIR X 12 WEEKS

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DISCLOSURES

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 JG is a consultant/advisor for and has received research grants from AbbVie, Cepheid, Gilead Sciences and Merck/MSD.



ACKNOWLEDGEMENTS

We extend our gratitude to the participants, their families, investigators and site personnel who participated in this study.

 <u>Australia</u>: Greg Dore, David Iser, Joseph Sasadeusz, Martin Weltman; <u>Canada</u>: Brian Conway, Roger P. LeBlanc, Daniele Longpre; <u>France</u>: Jean-Pierre Bronowicki, Joseph Moussalli, Fabien Zoulim; <u>Germany</u>: Andreas Trein, Albrecht Stoehr; <u>Israel</u>: Oren Shibolet; <u>Netherlands</u>: H. W. Reesink; <u>New Zealand</u>: Edward Gane; <u>Norway</u>: Olav Dalgard, Hege Kileng; <u>Romania</u>: Adrian Octavian Abagiu, Emanoil Ceausu, Adrian Streinu-Cercel; <u>Spain</u>: Juan Ignacio Arenas Ruiz-Tapiador, Jose Luis Calleja Panero, Juan Antonio Pineda, Conrado Fernandez Rodriguez, Juan Turnes Vazquez; <u>Taiwan</u>: Wan-Long Chuang, Cheng-Yuan Peng, Sheng-Shun Yang; <u>United Kingdom</u>: Kosh Agarwal, David Bell, Ashley Brown, John Dillon, Daniel M.H. Forton, Andrew Ustianowski; <u>United States</u>: Frederick L. Altice, David Michael Asmuth, Kathleen K. Casey, James N. Cooper, Stuart C. Gordon, Paul Y. Kwo, Jacob Paul Lalezari, William M. Lee, Alain H. Litwin, Annie Luetkemeyer, Andrew J. Muir, Ronald G. Nahass, Grisell Ortiz-Lasanta, K. Rajender Reddy, Kenneth E. Sherman, Jihad Slim, Mark S. Sulkowski, Andrew H. Talal, Joseph Leo Yozviak

This study and medical writing support were funded by Merck & Co., Inc.



BACKGROUND/AIMS

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- Emerging data suggest DAA therapy is effective in PWID receiving OAT¹⁻⁶
- C-EDGE Co-STAR demonstrated an SVR12 of 92% with no impact of drug use prior to or during treatment⁶
- Reinfection has been raised as a concern among clinicians who are reluctant to provide DAA treatment for recent PWID
- This study evaluated HCV reinfection and injecting risk behaviours among people enrolled in a three-year long term follow-up of people on stable OAT treated with elbasvir and grazoprevir

1) Grebely J, ILC 2017, Amsterdam, The Netherlands, April 19-23rd, 2017 (FRI-236). 2) Grebely CID 2016. 3) Grebely (CID 2016. 4) Grebely J, ILC 2017, Amsterdam, The Netherlands, April 19-23rd, 2017 (FRI-235). 5) Zeuzem, S. Ann Intern Med 2015. 6) Dore, GJ Ann Intern Med 2016.

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RESULTS

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- 199 of 296 enrolled into 3-year follow-up, 72% G1a, 20% G1b, DAA-treatment naïve
- 56% positive drug screen at first long-term follow-up visit (26% opioids, 11% cocaine, 8% amphetamines)
- 21% injecting in previous month
- 81% reported using sterile needle-syringe for all injections





CONCLUSIONS/IMPLICATIONS

- Overall, reinfection rate was low at 4.0/100 person years
 - Higher rate of reinfection in early follow-up may be due to more frequent follow-up
 - Persistent reinfection rate of 2.5/100 person years
- Spontaneous clearance of HCV reinfection observed in 3 of 8 participants
- First study of reinfection post-DAA therapy in people on OAT
- Further long-term follow-up needed to evaluate reinfection and further studies needed among those with more recent injecting



