



REPORTING ON EASL 2017

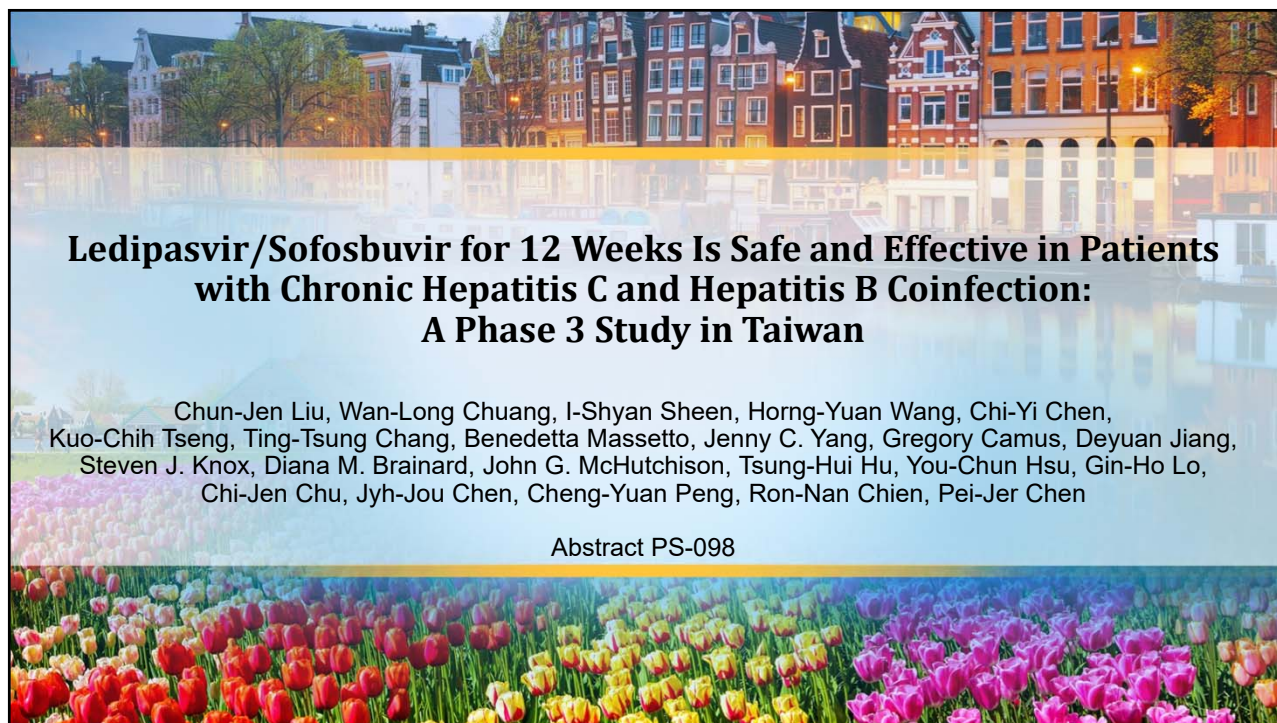
ADVANCES IN CHRONIC HEPATITIS C: MANAGEMENT AND TREATMENT

COMPREHENSIVE EXPERT REVIEW AND DISCUSSION OF KEY PRESENTATIONS

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HCV/HBV Co-Infection: Hepatitis B reactivation

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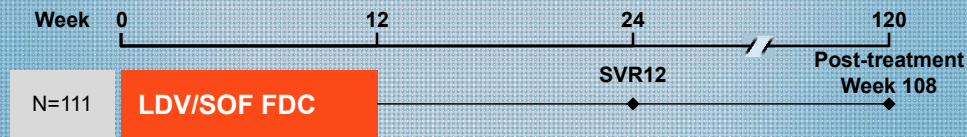


Ledipasvir/Sofosbuvir for 12 Weeks Is Safe and Effective in Patients with Chronic Hepatitis C and Hepatitis B Coinfection: A Phase 3 Study in Taiwan

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Abstract PS-098

Study Design



- Multicenter, open-label study at 14 sites in Taiwan
- Key inclusion criteria
 - GT 1 or 2 HCV-infected adults with HBV coinfection
 - HBsAg positive
 - Not currently on HBV treatment (>6 months)
 - Up to 50% may have had compensated cirrhosis
- Long-term follow-up through post-treatment Week 108

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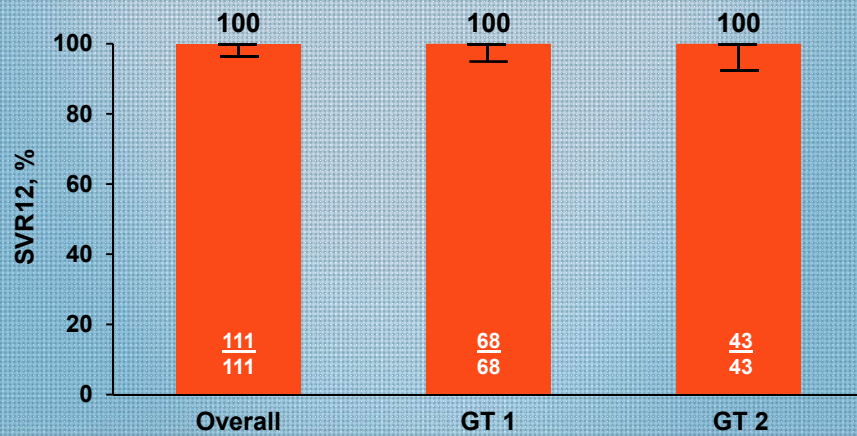
Demographics and Baseline Characteristics

	LDV/SOF 12 weeks N=111	
HCV	Mean age, y (range)	55 (32–76)
	Male, n (%)	42 (38)
	Mean BMI, kg/m ² (range)	25 (17–34)
	IL28B CC, n (%)	85 (77)
	GT 1 / GT 2, n (%)	68 (61) / 43 (39)
	HCV treatment experienced, n (%)	37 (33)
	Mean baseline HCV RNA, log ₁₀ IU/mL (range)	5.9 (3.8–7.1)
	Cirrhosis, n (%)	18 (16)
Mean ALT, U/L (range)	68 (17–281)	
HBV	HBsAg positive, n (%)	110* (99)
	HBeAg positive, n (%)	1 (<1)
	GT B/ GT C n (%)	37 (33) / 5 (5)
	GT Missing†	69 (62)
	HBV treatment experienced, n (%)	5 (4)
	Mean baseline HBV DNA, log ₁₀ IU/mL (range)	2.1 (1.3–5.8)
Baseline HBV DNA <LLOQ, n (%)	37 (33)	

*1 patient changed HBsAg status between screening and baseline; †HBV genotype could not be determined if HBV DNA <5000 IU/mL.

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Results: SVR12



- 18 patients had cirrhosis, 37 patients had prior HCV treatment, 46 patients had RASs at baseline (n=39 only NS5A; n=2 only NS5B; n=5 both NS5A and NS5B)

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Results: HBV Reactivation, Criteria

n, %	Overall N=111	BL HBV DNA <LLOQ n=37	BL HBV DNA ≥LLOQ n=74
Increase to ≥LLOQ	31 (28)	31 (84)	—
+ ALT >2x ULN	0	0	—
Increase >1 – <2 log ₁₀ IU/mL	37 (33)	11 (30)	26 (35)
+ ALT >2x ULN	1 (<1)	0	1 (1)
Increase ≥2 log ₁₀ IU/mL (any visit)	24 (22)	11 (30)	13 (18)
+ ALT >2x ULN	4 (4)	0	4 (5)

- No patient had AEs of jaundice, liver decompensation, liver failure or liver transplant

ULN, male 43 U/L, female 34 U/L

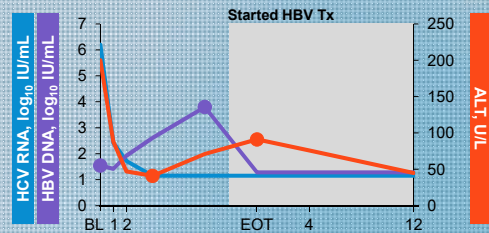
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Results:

Two Asymptomatic Patients Started HBV Therapy

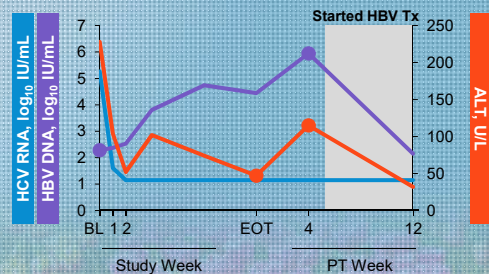
60-year-old female, HCV GT 1b, HBeAg negative, with cirrhosis

- HBV DNA increased from $1.54 \log_{10}$ IU/mL (BL) to $3.8 \log_{10}$ IU/mL at Day 57 (Week 8)
- Associated with ALT increase from nadir value of 41 to 71 IU/mL
- Started HBV treatment on study Day 71



61-year-old male, HCV GT 2, HBeAg negative, without cirrhosis

- HBV DNA increased from $2.28 \log_{10}$ IU/mL (BL) to $5.95 \log_{10}$ IU/mL 30 days post last dose (post-treatment Week 4)
- Associated with ALT increase from nadir value of 47 to 115 IU/mL
- Started HBV treatment during post-treatment follow-up Week 5



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Conclusions

- LDV/SOF for 12 weeks achieved 100% SVR12 rate in patients with HBV and HCV GT 1 or 2 infection
- LDV/SOF for 12 weeks was well tolerated with no treatment discontinuation due to AEs
- Treatment with LDV/SOF for 12 weeks was associated with “silent” HBV viral reactivation in 63% of patients (70/111)
 - No patient experienced clinical signs or symptoms of HBV reactivation
 - 5 (5%) patients had concomitant increase in ALT; 2 (2%) patients started HBV therapy
 - Higher HBV DNA and ALT were associated with asymptomatic clinical HBV reactivation

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