



ONLINE EXPERT POSTER REVIEW AND DISCUSSION

Advances in Chronic Hepatitis C Management and Treatment

REPORTING FROM
THE 62ND AMERICAN ASSOCIATION FOR
THE STUDY OF LIVER DISEASES ANNUAL MEETING
(This coverage is not sanctioned by the conference organizers and is not an official part of the conference proceedings.)

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Final Results of ENABLE 1, a Phase 3, Multicenter Study of Eltrombopag as an Adjunct for Antiviral Treatment of Hepatitis C Virus -Related Chronic Liver Disease Associated With Thrombocytopenia

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Abstract LB-3

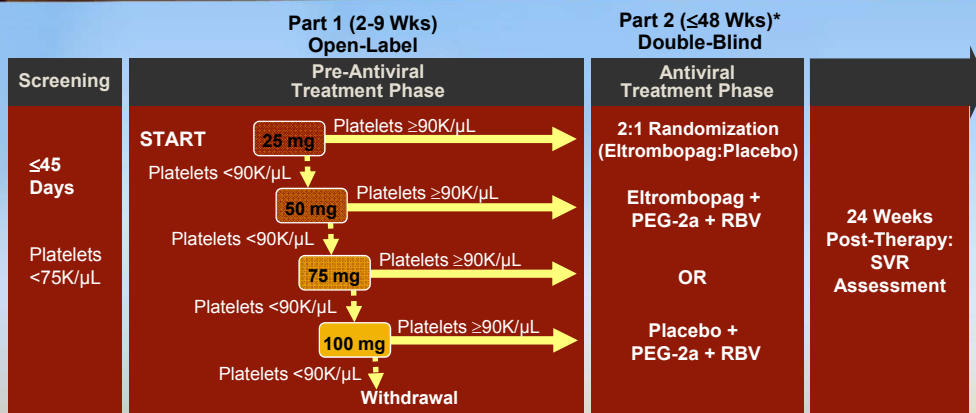


ENABLE 1 Study

Objectives

- To assess the ability of eltrombopag to
 - Increase platelet counts in patients with chronic HCV and thrombocytopenia
 - Enable initiation of antiviral therapy
 - Allow maintenance of antiviral therapy
 - Increase SVR
- To evaluate the safety and tolerability of eltrombopag
- **Primary efficacy outcome:** proportion of patients who achieve SVR

Randomized Withdrawal Study Design



- Growth factor support allowed for anemia and neutropenia
- PEG-2a reduced or discontinued for thrombocytopenia
- Eltrombopag/matched placebo could be titrated during Part 2 to maintain platelets 90K–200K/μL

*24 weeks if HCV genotype 2/3, otherwise 48 weeks.

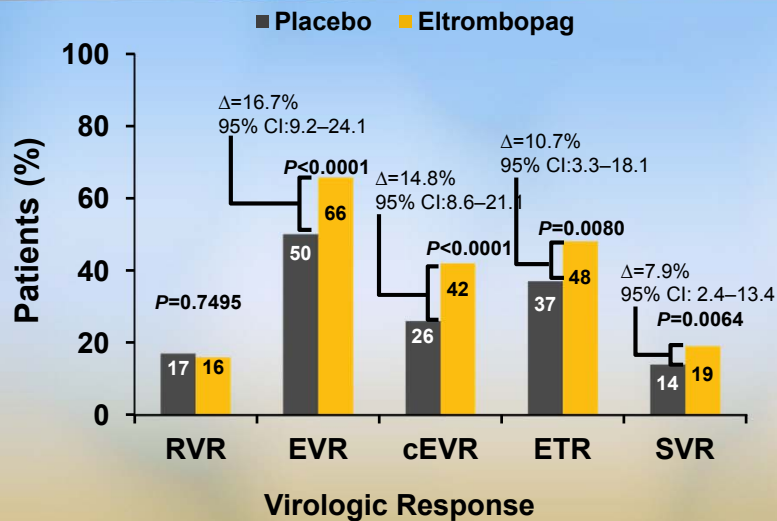
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Results of Open-Label Therapy

N=716		
Initiated antiviral therapy, n (%)	680 (95)	
Failed to raise platelets >90,000/μL	11 (2)	
Dose of eltrombopag that enabled initiation of antiviral therapy		
	n (%)	Cumulative %
25 mg	451 (63)	63
50 mg	176 (25)	88
75 mg	39 (5)	93
100 mg	14 (2)	95

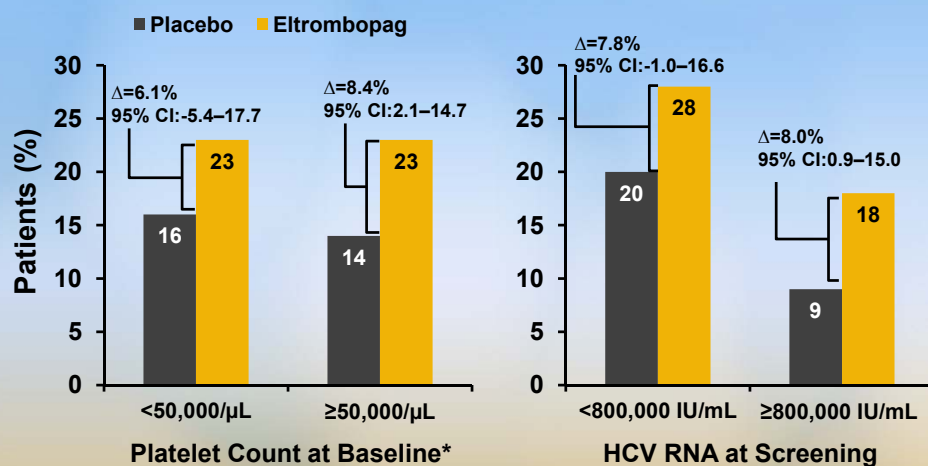
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Virologic Responses (ITT)



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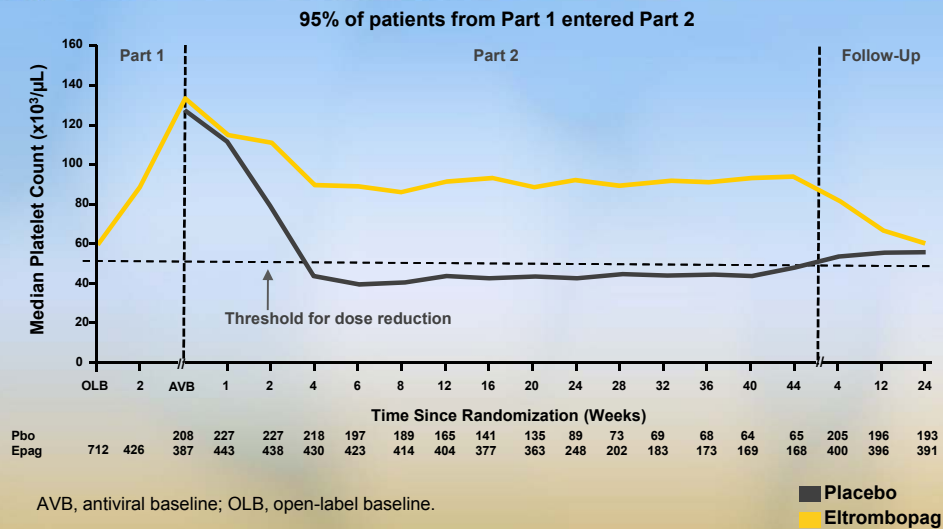
SVR by Platelet Count at Baseline and HCV RNA at Screening (ITT)



*Baseline is on/prior to Day 1 of Part 1/open-label phase.

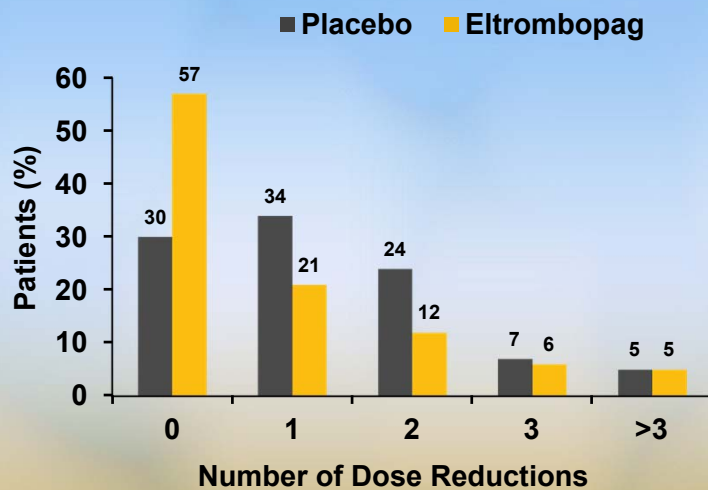
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Median Platelet Counts (ITT)



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PEG-2a Dose Reductions (ITT)



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Summary of Patients with Adverse Events

AE Type, No. of Patients (%) [*]	Placebo (n=232)	Eltrombopag (n=449)
Any AE	226 (97)	430 (96)
Any SAE	35 (15)	90 (20)
Any fatal AE^{**}	6 (3)	10 (2)
Any drug-related AE	217 (94)	420 (94)
Any AE leading to medication discontinuation	68 (29)	85 (19)
Any AE leading to study withdrawal	7 (3)	11 (2)

^{*}Double-blind safety population. AEs on treatment + 30 days follow-up are reported except as noted.

^{**}On treatment + 6 months follow-up.

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Adverse Events of Special Interest

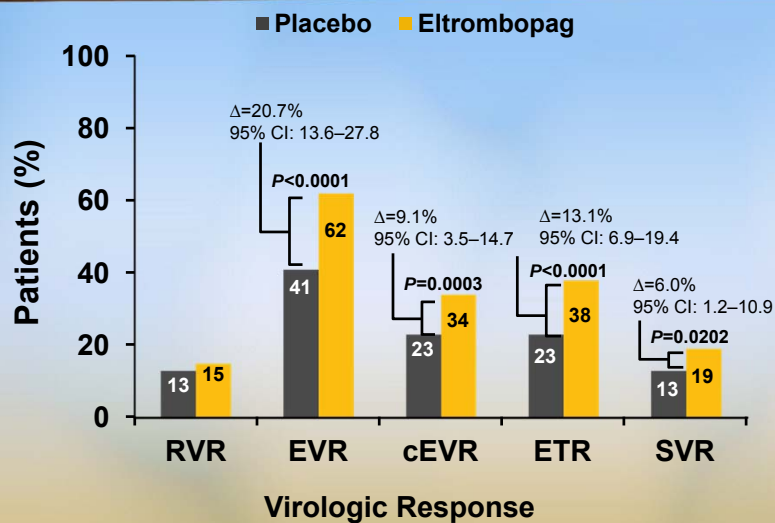
AE Type, No. of Patients (%) [*]	Placebo (n=232)	Eltrombopag (n=449)
Thromboembolic	4 (2)	11 (2)
Hepatobiliary		
Events suggestive of progressive liver disease	19 (8)	59 (13)
ALT >3x ULN	34 (15)	67 (15)
Malignancies	5 (2)	13 (3)
Hepatocellular carcinoma	3 (1)	13 (3)
Other	2 (<1)	0
Bleeding	59 (25)	83 (18)
Variceal hemorrhage	2 (<1)	8 (2)
Gastrointestinal bleeding	0	9 (2)
Ocular		
AEs	27 (12)	53 (12)
Progression of pre-existing cataract ^{**}	4 (2)	21 (5)
Incident cataract ^{**}	4 (2)	17 (4)

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ENABLE 2: Virologic Responses (ITT)



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ENABLE 2: Preliminary Summary of Patients With Adverse Events

AE Type, No. of Patients (%) [*]	Placebo (n=252)	Eltrombopag (n=506)
Any AE	235 (93)	475 (94)
Any serious AE (SAE)	37 (15)	99 (20)
Any fatal AE ^{**}	4 (2)	19 (4)
Any drug-related AE	225 (89)	453 (90)
Any AE leading to medication discontinuation	70 (28)	115 (23)
Any AE leading to study withdrawal	9 (4)	23 (5)
Any hepatic decompensation, hepatocellular carcinoma, or death	20 (8)	74 (15)
Any thrombotic/thromboembolic event	1 (<1)	22 (4)

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