REAL-WORLD EFFECTIVENESS AND SAFETY OF OMBITASVIR, PARITAPREVIR/R ± DASABUVIR ± RIBAVIRIN IN PATIENTS RECEIVING OPIATE SUBSTITUTION THERAPY: RESULTS FROM THE GERMAN OBSERVATIONAL STUDY LIFE-C

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BACKGROUND

Patients receiving opiate substitution therapy (OST) constitute a substantial share of patients diagnosed with chronic hepatitis C (CHC) in Germany. However, clinical data for this distinct patient group is limited. LIFE-C is a non-interventional observational study in patients with CHC receiving Ombitasvir, Paritaprevir and Ritonavir ± Dasabuvir (3D REGIMEN) ± Ribavirin (RBV).
Here, we report the effectiveness, safety, adherence, and health-related quality of life (QoL) in this group of patients in comparison to patients without OST.

METHODS

All adult patients treated with 3D REGIMEN ± RBV according to the local label were eligible for the study. Before enrollment, all patients voluntarily signed and dated informed consent. Patients' visits were scheduled at the physician's discretion and according to clinical practice. Study documentation was possible at baseline, during and at the end of the treatment, and at post-treatment week 4, 12, and 24. Additionally, at these study time points, patients filled in several questionnaires regarding patient-related QoL outcomes.

Figure 1. Patient Flow through the Study

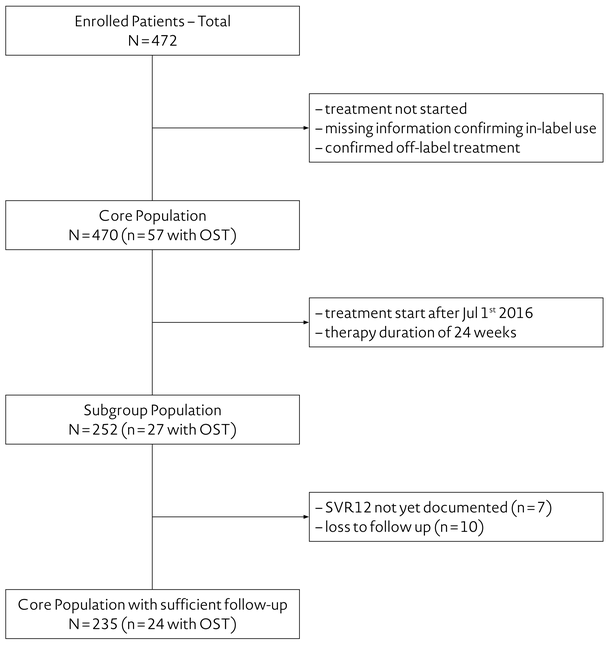


Figure 1 shows the patient flow through the study LIFE-C. Displayed patient numbers / sample sizes are based on the data snapshot from Mar 20 2017. Patient enrollment was closed on Dec 31 2016.

METHODS CONT'D

Assessments

1. Effectiveness:
Effectiveness is analyzed in the Core Population with sufficient follow up. This population includes all patients with known end of study treatment and one of the following conditions:

a. evaluable HCV RNA data ≥ 70 days after the last actual dose, or
b. a HCV RNA value ≥ 50 IU/mL at the last measurement or
c. HCV RNA value is missing due to safety or efficacy reasons (i.e. patients without a value due to adverse events or breakthrough are included, however, patients lost to follow up are excluded)

2. Safety (evaluation of occurrence of adverse events): includes all patients of the subgroup population

3. Adherence: assessed in all patients of the subgroup population with the respective documentation available

4. Quality of Life Assessments: assessed in all patients of the subgroup population with the respective documentation available

a. Pictorial Representation of Illness and Self-Measure (**PRISM**):[1] A brief quantitative method to assess the perceived burden of suffering due to illness.
b. Functional Assessment of Chronic Illness Therapy-Fatigue (**FACIT-Fatigue**)[2]
c. Assessment of work productivity and activity impairment (**WPAI Hep C V2.0**)[3]
d. Patient Activation Measure (**PAM-13**)[4]

RESULTS

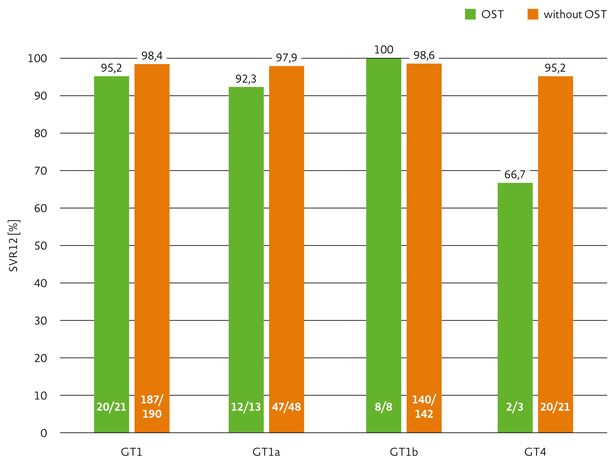
Table 1. Patient characteristics at baseline

Characteristics	Patients without OST (N = 225)	Patients with OST (N = 27)
Mean Age (years; mean ± SD) [IQR]	54 ± 13.7 [45 – 64]	47 ± 10.5 [40 – 55]
Male Sex (%, n)	60.0 % (135)	74.1 % (20)
HCV Genotype (%, n) **GT1a** **GT1b** **GT4**	 24.4 % (55) 65.8 % (148) 9.8 % (22)	 55.6 % (15) 29.6 % (8) 14.8 % (4)
*** Cirrhosis (%, n)** **Transition to Cirrhosis (%, n)** **No Cirrhosis (%, n)**	8.0 % (18) 6.2 % (14) 85.8 % (193)	3.7 % (1) 0 (0) 96.3 % (26)
Treatment-experienced (%, n)	32.9 % (74)	37.0 % (10)
HCV RNA (log10 IU/mL; mean ± SD) [IQR]	5.88 ± 0.81 [5.49 – 6.45]	6.21 ± 0.70 [5.76 – 6.76]
HIV (%, n) **HBV (%, n)**	8.4 % (19) 2.2 % (5)	3.7 % (1) 0 (0)

IQR: interquartile range

RESULTS CONT'D

Figure 2. Effectiveness – SVR Rates



The study started in 2015, December. Enrollment was terminated on December 31st 2016. 472 patients were enrolled. 252 patients were analyzed for baseline, safety and QoL (as available), 235 were available for analysis of effectiveness (**Figure 1**). Overall SVR was 97.4 % – within the subgroup of patients with OST, SVR12 was 91.7 %, in the subgroup without OST, it was 98.1 % (**Figure 2**) with fatigue, pruritus, and rash as the most common adverse events (**Table 3**). Within the subgroup population it could be demonstrated that high rates of adherence (95 – 105 %) were achieved by 90.9 % of antivirally treated patients with OST (20/22) and by 96.1 % of patients without OST (195 / 203). The course of assessed QoL data is displayed in **Table 2**.

Table 2. Quality of Life – PROs (OST vs. w/o OST)

Questionnaire	Baseline (Mean)	On Treatment (Mean Delta)	End of Treatment (Mean Delta)	SVR 12 (Mean Delta)
PRISM w/o OST	9.19 (n = 27) 12.1 (n = 224)	–	–	+9.47 (n = 18) +6.05 (n = 188)
FACIT w/o OST	28.2 (n = 26) 36.9 (n = 215)	+4.78 (n = 23) +0.49 (n = 175)	+11.3 (n = 19) +0.91 (n = 170)	+13.3 (n = 16) +3.83 (n = 150)
WPAI (Work Prod. Imp.) w/o OST	20.4 (n = 7) 17.1 (n = 89)	–	−14.9 (n = 6) +6.4 (n = 71)	−10.8 (n = 5) −4.8 (n = 61)
WPAI (Total Activ. Imp.) w/o OST	38.0 (n = 25) 25.5 (n = 211)	–	−23.1 (n = 16) +0.7 (n = 160)	−18.6 (n = 14) −11.0 (n = 141)
PAM-13 w/o OST	62.2 (n = 26) 66.1 (n = 179)	–	+2.68 (n = 17) −0.17 (n = 122)	–

Changes over time are presented as delta from BL scores for the subgroup of patients that completed the respective evaluation time point (OT, EoT, SVR12).

RESULTS CONT'D

Table 3. Safety – Adverse Events

TEAE	Subgroup Population (N = 225)	Patients with OST (N = 27)
Adverse Events Patients with at least 1 AE Total number of AEs	 58 (25.8 %) 101	 8 (29.6 %) 12
Type of Adverse Event Fatigue Pruritus Rash	 17 (7.6 %) 9 (4.0 %) 6 (2.7 %)	 2 (7.4 %) 1 (3.7 %) 2 (7.4 %)
Serious Adverse Events Patients with at least 1 SAE Total number of SAEs	 5 (2.2 %) 5	 0 (0 %) 0

CONCLUSIONS

- Under real-world conditions, ombitasvir/paritaprevir/r ± dasabuvir ± RBV is highly effective and well tolerated.
- Treatment outcomes in OST patients are comparable to non-OST patients.
- All assessed QoL parameters improved in OST patients during the course of antiviral therapy.

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DISCLOSURES

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