

DCV, SOF and RBV combination effective / tolerated in HCV with adv, cirrhosis / post-transplant recurrence

25 April 2015

Phase 3 results presented today at The International Liver Congress 2015 show that a combination of daclatasvir (DCV), sofosbuvir (SOF) and ribavirin (RBV) for 12 weeks was effective and well tolerated amongst patients with hepatitis C virus (HCV) infection with advanced cirrhosis and post-transplant recurrence. Sustained virologic response rates at 12 weeks (SVR12) were >90% in patients with Child-Pugh class A or B cirrhosis but lower in Child-Pugh class C. SVR12 was achieved by 94% of liver transplant recipients with HCV recurrence.

ALLY-1 is an open-label study, including treatment-naive or -experienced adults with HCV infection of any genotype.

The most common adverse events (AEs) were headache, fatigue, anaemia, diarrhoea and nausea. There were no treatment-related serious AEs. One post-transplant patient discontinued all therapy after 31 days due to headache but achieved SVR12.

More information: DACLATASVIR, SOFOSBUVIR, AND RIBAVIRIN COMBINATION FOR HCV PATIENTS WITH ADVANCED CIRRHOSIS OR POSTTRANSPLANT RECURRENCE: PHASE 3 ALLY-1 STUDY, The International Liver Congress 2015.

Provided by European Association for the Study of the Liver

APA citation: DCV, SOF and RBV combination effective / tolerated in HCV with adv, cirrhosis / post-transplant recurrence (2015, April 25) retrieved 29 September 2022 from <https://medicalxpress.com/news/2015-04-dcv-sof-rbv-combination-effective.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.