LB # 665

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Safety and Efficacy of IFN-free, Sofosbuvir/RBV Therapy in HIV/HCV Liver Transplanted Patients

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BACKGROUND & METHODS

- Long-term outcome in HCV/HIV-coinfected subjects undergoing liver transplant (LT) relies on the management of HCV recurrence.
- peg-IFN-based therapies are associated to high toxicity and low antiviral efficacy, leading to worse outcomes in comparison with HCV monoinfected subjects.
- To date there are no data with new DAAs in HIV/HCV subjects after LT

- First description of the on-treatment safety and efficacy of sofosbuvir (SFB)-an HCV-NS5B polymerase inhibitor- 400mg/d plus RBV in 7 HIV/HCV-coinfected patients with HCV recurrence after LT.

All patients received SFB under an international, multicenter, GILEAD´s Compassionate Use Program

RESULTS

Baseline features (N=7)

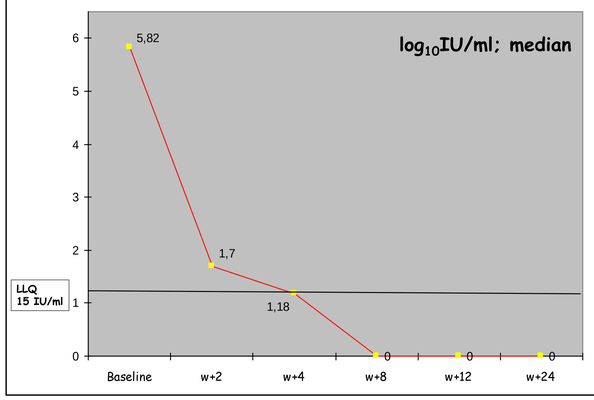
Age (median, range)	50 (40-62)
Male Sex (%)	57%
AIDS (%)	71%
Undetectable HIV-RNA (%)	100%
Median CD4 Count (%, absolute)	29% (160 cells/ml) <200 (71%)
RALTEGRAVIR-based HAART	100%
TRUVADA™ **KIVEXA™**	43% 57%
Tacrolimus use **Steroids use**	86% 43%

HCV Genotype 1 4 3	5 (71%) 1 (14%) 1 (14%)
HCV-RNA log_{10} IU/ml (median, range)	5,82 (1,18-8,23)
IL28B Genotype (n,%) CC CT/TT	 2 (29%) 4/1 (71%)
Post LT prior therapy **-peg/RBV** **-HCV-PI-based therapy**	4 (57%) 2 (null*) 2 (severe toxicity)
Cirrhosis (n,%) **-MELD (median, range)** **-CHILD PUGH ≥6**	5 (71%) 9 (6-32) 60%
FCH (n,%)	2 (29%)

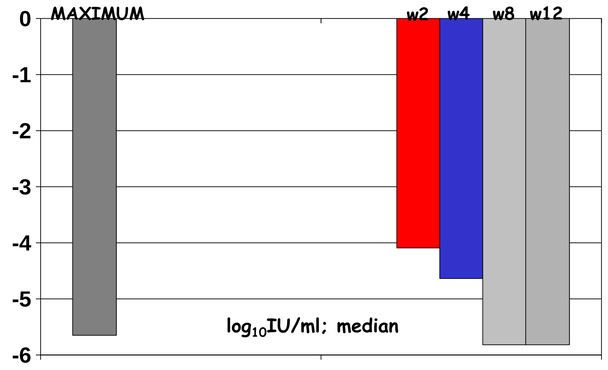
AST (U/l) (median, range)	152 (20-280)
ALT (U/l) (median, range)	90 (10-189)
GGT (U/l) (median, range)	198 (22-1885)
Alkaline Phosphatase (U/l; median, range)	154 (97-935)
Total Bilirubin (mg/dl) (median, range)	2,15 (0,58-18,5)
Prothrombin activity (%; median, range)	74 (31-105)
INR	1.1 (1-2,4)
Albumin (g/dl) (median, range)	2,97±0,84

Hemoglobin (g/dl) (median, range)	12,1 (8,7-15)
PMN (cells/ml) (median, range)	1600 (760-2920) <1.000 (14%)
Platelet count (cells/ml) (median, range)	71.514±45672 <50.000 (43%)
RBV dose ≥800mg/d	71% (N=5)
GFR (ml/min) (mean±SD)	62±28 <50 (43%)
Days from LT to SFB/RBV (median, range)	900 (88-1932)
Weeks on SFB/RBV (median, range)	11 (3-46) >12w (43%)

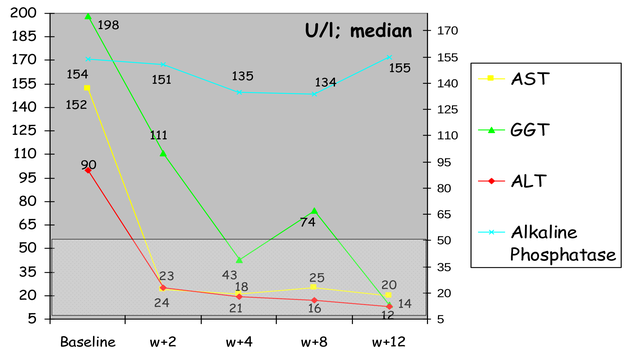
Evolution of HCV-RNA



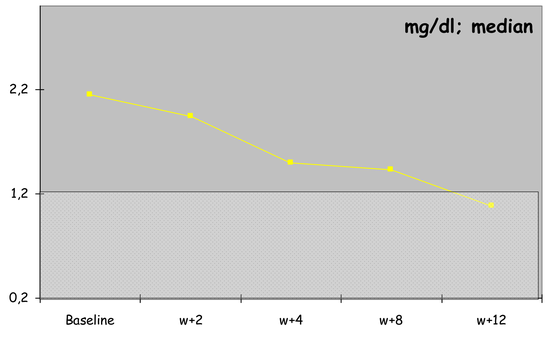
Absolute HCV-RNA decrease



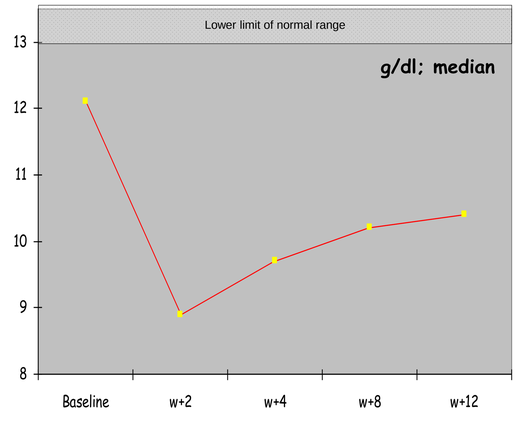
Evolution of Liver Transaminases



Evolution of Total Bilirubin



Evolution of Hemoglobin



Hemoglobin nadir: 8g/dl
71% of patients reached Hb nadir within first month

Adverse Events

RBV dose adjustment	57% (N=4) 75% within 1st month (median 15d)
Maximum Hb decrease (g/dl; median)	-2,95 (71% within 1st month)
Blood Transfusions	43% (N=3)
plusEPO use	14% (N=1)
Early withdrawal	0
Infections	0
Immunosuppresive drugs dose adjustment	57% (N=4)
Change to SFB/Daclatasvir	3 (43%) Median time to change 32d

CONCLUSIONS

1. An IFN-free, SFB/RBV regimen showed an excellent safety and efficacy profile in HIV/HCV-coinfected patients with severe liver damage related to HCV recurrence after LT.

2. The rate of RVR was 100%, regardless baseline HCV-RNA, IL28B or HCV genotype, or previous pattern of response to peg-IFN-based therapy.