HepCBC Hepatitis C Education and Prevention Society
Patient Group recommendation for Harvoni™
February 23, 2016

General Recommendations:

(a) HepCBC supports the CDEC recommendations that all patients with CHC should be considered for treatment, regardless of fibrosis score. We recognise priority needs to be given to those with advanced liver disease, according to the concept of Treatment as Prevention of morbidity/mortality. However there is also clear evidence that the sooner hepatitis C treatment is given, the greater the chance of achieving SVR, the greater chance that liver cancer (and cancer in general), liver failure and transplant, plus other morbidities and mortality will be prevented, and the greater number of QALYs gained.

(b) HepCBC also supports the addition of one-time-only age-cohort testing for hepatitis C to the current Canadian hepatitis screening guidelines. This action could result in identifying and being able to treat almost every Canadian with hepatitis C. This would greatly enhance the total benefit of these medications to our society as well as providing a good rationale for the TCPA to negotiate lower prices per treatment.

Recommendation for: Harvoni™ (treatment for CHC, genotype 1)

HepCBC supports the CDEC recommendations for Harvoni™ (sofosbuvir/ledipasvir) as an approved treatment for CHC **genotype 1** with modifications as follows:

1. Treatment naïve (or treatment-experienced either with Peg-IFN/RBV or with a first generation protease inhibitor) for 12 weeks (without cirrhosis).

2. For those who are treatment-naïve, without cirrhosis, and HCV RNA of less than 6 million IU/ml, treatment can be shortened to 8 weeks.

3. For those with compensated cirrhosis, daily weight-based ribavirin should be included.

4. For those who are ribavirin-intolerant or for whom contraindications exist, treatment can be lengthened to 24 weeks without ribavirin.

5. Treatment with sofosbuvir/ledipasvir including ribavirin can be prolonged to 24 weeks for those with negative predictors of response.

6. HepCBC supports CDEC Recommendation 5 that treatment with sofosbuvir/ledipasvir is a suitable choice for G1 patients who have failed 1st generation protease inhibitor treatment. However, HepCBC suggests the inclusion of ribavirin should such patients be cirrhotic.

The recommendations of Harvoni™ for a treatment duration of 8 weeks or Harvoni™ with the inclusion of ribavirin and/or the prolonging of treatment to 24 weeks for G1 patients with certain characteristics are supported by EASL guidelines (see references).

Recommendation for: Harvoni™ (treatment for CHC, genotypes 3 - 6)

7. There is evidence that Harvoni™ (sofosbuvir/ledipasvir) + ribavirin could provide an alternative regime for **genotype 3 treatment naïve patients** (see Gane et al, 2015) with a treatment duration of 12 weeks.

8. In addition, Harvoni™ (sofosbuvir/ledipasvir) can be an approved treatment for CHC **genotype 4** as follows:

   8.1 For those without cirrhosis: 12 weeks.

   8.2 For those with cirrhosis: 12 weeks, daily weight-based ribavirin should be included.

   8.3 For those who are ribavirin-intolerant but who have cirrhosis: 24 weeks.

9. Harvoni™ (sofosbuvir/ledipasvir) can also be an approved treatment for CHC **genotypes 5 & 6** as follows:

   9.1 For those without cirrhosis: 12 weeks.

   9.2 For those with cirrhosis: 12 weeks, daily weight-based ribavirin should be included

   9.3 For those who are ribavirin-intolerant but who have cirrhosis: 24 weeks.

The recommendations for Harvoni™ are mainly supported by:

EASL guidelines: (genotype 1, 4, 5 & 6)
http://www.easl.eu/medias/cpg/HEPC-2015/Full-report.pdf

and also in part by:

AASLD guidelines: (genotype 1, 4, 5 & 6)
http://www.hcvguidelines.org/

CASL guidelines: (genotype 1, 4 & 6)
http://www.liver.ca/files/Professional_Education_Partnerships/Information_Resources_for_HCP/CASL_Hep_C_Consensus_Guidelines_Update_-_Jan_2015.pdf

In addition, for genotypes 3 & 6:

Gane EJ, Hyland RH, An D, Svarovskaia E, Pang, PS, Brainard D & Stedman CA (2015) 'Efficacy of Ledipasvir and Sofosbuvir, With or Without Ribavirin, for 12 Weeks in Patients With HCV Genotype 3 or 6 Infection' *Gastroenterology*, Volume 149, Issue 6, 1454 – 1461