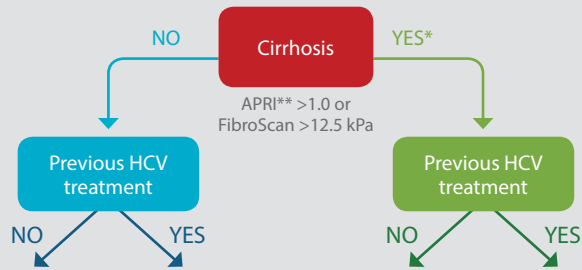


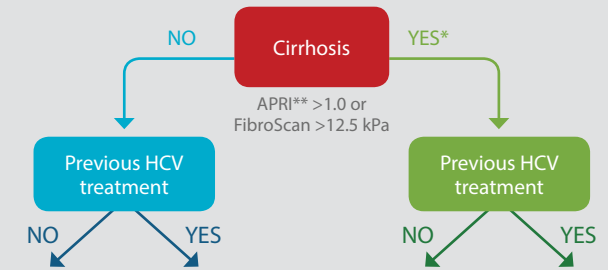
HCV TREATMENTS QUICK REFERENCE TOOL

HCV GENOTYPE 1



HCV genotype 1 regimen	No cirrhosis		Cirrhosis	
	Treatment-naive	Treatment-experienced***	Treatment-naive	Treatment-experienced***
Sofosbuvir/ velpatasvir ± Ribavirin ¹¹	12 wks	12 wks	12 wks (+ Ribavirin ¹)	12 wks (+ Ribavirin ¹)
Glecaprevir/ pibrentasvir	8 wks	8 wks: PRS experienced ² 12 wks: NS3/4a PI experienced ² 16 wks: NS5A inhibitor experienced ²	12 wks	12 wks ³ or 16 wks: NS5A inhibitor experienced
Sofosbuvir + ledipasvir	8 or 12 wks ⁴	12 wks ⁵	12 wks	24 wks ⁵
Sofosbuvir + daclatasvir ¹⁰ ± Ribavirin ¹¹	12 wks	12 or 24 wks ⁶	12 wks + ribavirin or 24 wks	12 wks + ribavirin or 24 wks ⁶
Grazoprevir/ elbasvir ± Ribavirin ¹¹	12 wks	G1a Relapse ⁷ : 12 wks On-treatment virologic failure ⁷ : 16 wks + ribavirin G1b: 12 wks	12 wks	G1a Relapse ⁷ : 12 wks On-treatment virologic failure ⁷ : 16 wks + ribavirin G1b: 12 wks

HCV GENOTYPE 2 / 3



HCV genotype 2 regimen	No cirrhosis		Cirrhosis	
	Treatment-naive	Treatment-experienced***	Treatment-naive	Treatment-experienced***
Sofosbuvir/ velpatasvir ± Ribavirin ¹¹	12 wks	12 wks	12 wks (+ Ribavirin ¹)	12 wks (+ Ribavirin ¹)
Glecaprevir/ pibrentasvir	8 wks	8 wks	12 wks	12 wks
HCV genotype 3 regimen				
Sofosbuvir/ velpatasvir ± Ribavirin ¹¹	12 wks	12 wks	12 wks (+ Ribavirin ^{1,8})	12 wks (+ Ribavirin ^{1,8})
Glecaprevir/ pibrentasvir	8 wks	16 wks	12 wks	16 wks
Sofosbuvir + daclatasvir ¹⁰ ± Ribavirin ¹¹	12 wks	12 wks ⁹	12 wks + ribavirin or 24 wks ⁹	12 wks + ribavirin or 24 wks ⁹

***IF PATIENT HAS CIRRHOSIS, REFER TO A SPECIALIST FOR ASSESSMENT**

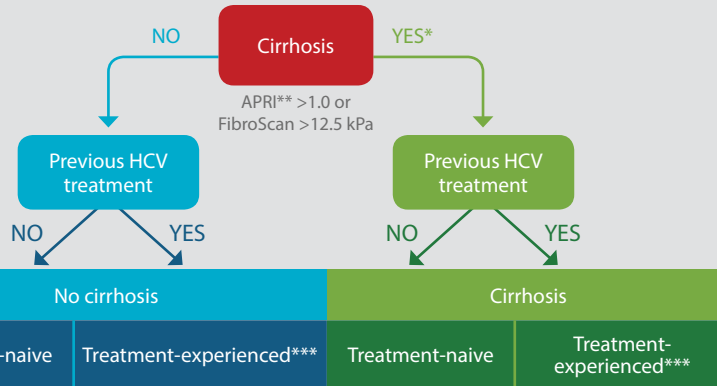
****REFER FOR FIBROSCAN IF POSSIBLE**

***** IF A PATIENT HAS FAILED DAA THERAPY, DISCUSS WITH OR REFER TO A SPECIALIST FOR ASSESSMENT**



HCV TREATMENTS QUICK REFERENCE TOOL

HCV GENOTYPE 4 / 5 / 6



HCV genotype 4 regimen	No cirrhosis		Cirrhosis	
	Treatment-naive	Treatment-experienced***	Treatment-naive	Treatment-experienced***
Sofosbuvir/ velpatasvir ± Ribavirin ¹¹	12 wks	12 wks	12 wks (+ Ribavirin ¹)	12 wks (+ Ribavirin ¹)
Glecaprevir/ pibrentasvir	8 wks	8 wks	12 wks	12 wks
Grazoprevir/ elbasvir ± Ribavirin ¹¹	12 wks	Relapse ⁷ : 12 wks On-treatment virologic failure ⁷ : 16 wks + ribavirin	12 wks	Relapse ⁷ : 12 wks On-treatment virologic failure ⁷ : 16 wks + ribavirin
HCV genotype 5/6 regimen				
Sofosbuvir/ velpatasvir ± Ribavirin ¹¹	12 wks	12 wks	12 wks (+ Ribavirin ¹)	12 wks (+ Ribavirin ¹)
Glecaprevir/ pibrentasvir	8 wks	8 wks	12 wks	12 wks

- Sofosbuvir/velpatasvir, genotype 1-6: Add ribavirin in people with decompensated cirrhosis.
- Glecaprevir/pibrentasvir, genotype 1, no cirrhosis: 8 weeks – Treatment experienced and failure with pegIFN, ribavirin and/or sofosbuvir only; 12 weeks – Treatment experienced and failure with a regimen including an NS3/4A PI; 16 weeks – Treatment experienced and failure with a regimen including an NS5A inhibitor.
- Glecaprevir/pibrentasvir, genotype 1, cirrhosis: 12 weeks – Treatment experienced and failure with a regimen including pegIFN, ribavirin, sofosbuvir and/or an NS3/4A PI; 16 weeks – Treatment experienced and failure with a regimen including an NS5A inhibitor (without an NS3/4A PI).
- Sofosbuvir/ledipasvir, genotype 1: Consider 8 weeks for treatment naïve people with no cirrhosis and HCV RNA < 6 million IU/. Treat for 12 weeks if these criteria are not met.
- Sofosbuvir / ledipasvir, genotype 1: For people who have failed pegIFN + ribavirin +/- protease inhibitor.
- Sofosbuvir + daclatasvir, genotype 1: 12 weeks without ribavirin - no cirrhosis and treatment failure with pegIFN + ribavirin or sofosbuvir + ribavirin; 24 weeks without ribavirin - cirrhosis and treatment failure with pegIFN + ribavirin;

- 24 weeks without ribavirin - with or without cirrhosis and treatment failure with protease inhibitor + pegIFN + ribavirin.
- Grazoprevir/elbasvir, genotype 1 and 4: Treatment experience refers to pegIFN + ribavirin +/- protease inhibitor (GT1 only). Relapse = failure to achieve SVR despite an end-of-treatment response; on-treatment virological failure = null response, partial response, virological breakthrough or rebound, or intolerance to prior treatment.
- Sofosbuvir/velpatasvir, genotype 3: Consider adding ribavirin in people with compensated cirrhosis
- Sofosbuvir + daclatasvir, genotype 3: 12 weeks without ribavirin - no cirrhosis and treatment failure with pegIFN + ribavirin or sofosbuvir + ribavirin; 24 weeks without ribavirin - cirrhosis and treatment failure pegIFN + ribavirin or sofosbuvir + ribavirin.
- Daclatasvir: Dose modification is required when used in combination with specific antiretroviral therapies for HIV (see Section 10.3.3 of the Recommendations for the management of hepatitis C virus infection: a consensus statement 2016 or <https://www.hep-druginteractions.org/>).
- Ribavirin (weight-based dosing): <75 kg, 1000 mg ribavirin per day; ≥75 kg, 1200mg ribavirin per day.

TREATMENT AND POST-TREATMENT MONITORING

Assessment	Week 0	Week 12 after EOT (SVR)
Full blood examination	•	
Urea and electrolytes	•	
Liver function tests*	•	•
HCV RNA levels (quantitative)	•	
HCV RNA PCR (qualitative)		•

EOT: End of treatment, SVR = sustained virological response at least 12 weeks after treatment (cure)

- *People treated with grazoprevir/ elbasvir should have LFTs at Week 8 to assess for hepatotoxicity.
- The frequency of review should be individualised.
- Patients taking ribavirin may require FBE at Week 2 and Week 4 and then every 4 weeks until end of treatment.
- Patients with cirrhosis require HCC screening with liver ultrasound every 6 months.
- Patients with decompensated liver disease require close monitoring, with review every 2–4 weeks. Measurement of quantitative HCV RNA level is recommended on-treatment to confirm viral suppression.

APRI SCORE

$$APRI = \left(\frac{\frac{AST\ Level}{Upper\ Limit\ of\ Normal}}{Platelet\ count\ (10^9/L)} \right) \times 100$$

MORE INFORMATION

- testingportal.ashm.org.au/hcv
- www.hepcguidelines.org.au
- www.pbs.gov.au
- www.gesa.org.au

***IF PATIENT HAS CIRRHOSIS, REFER TO A SPECIALIST FOR ASSESSMENT**

****REFER FOR FIBROSCAN IF POSSIBLE**

***** IF A PATIENT HAS FAILED DAA THERAPY, DISCUSS WITH OR REFER TO A SPECIALIST FOR ASSESSMENT**