



The Hepatitis C Epidemic in 2018 & Beyond

Successes and Challenges on the way to a Hep C Free San Francisco

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Disclosures

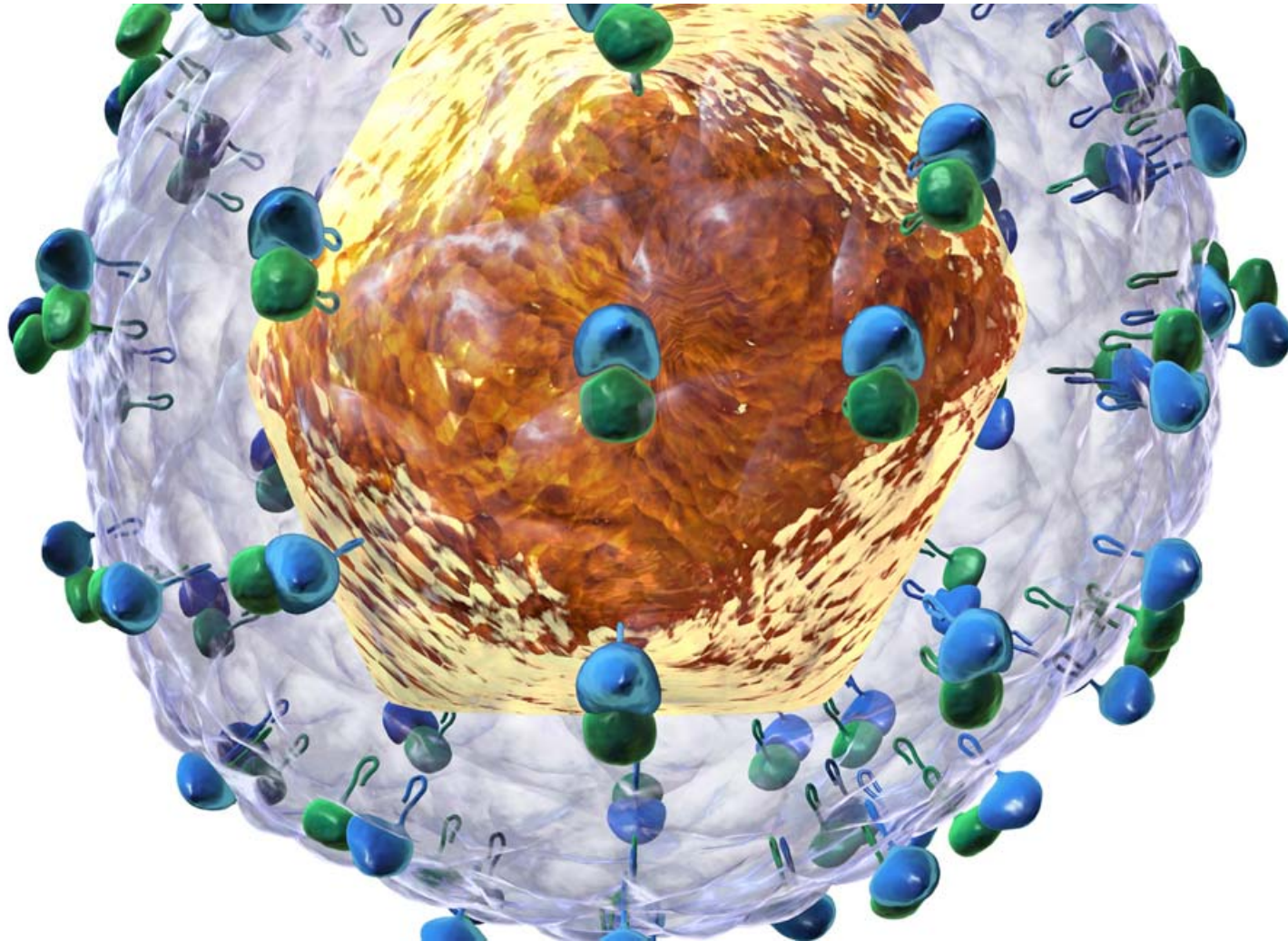
I have received research grant support to UCSF related to HCV from the following:

- ACTG (NIH)
- Abbvie
- Gilead
- Merck
- Proteus

Presentation Outline

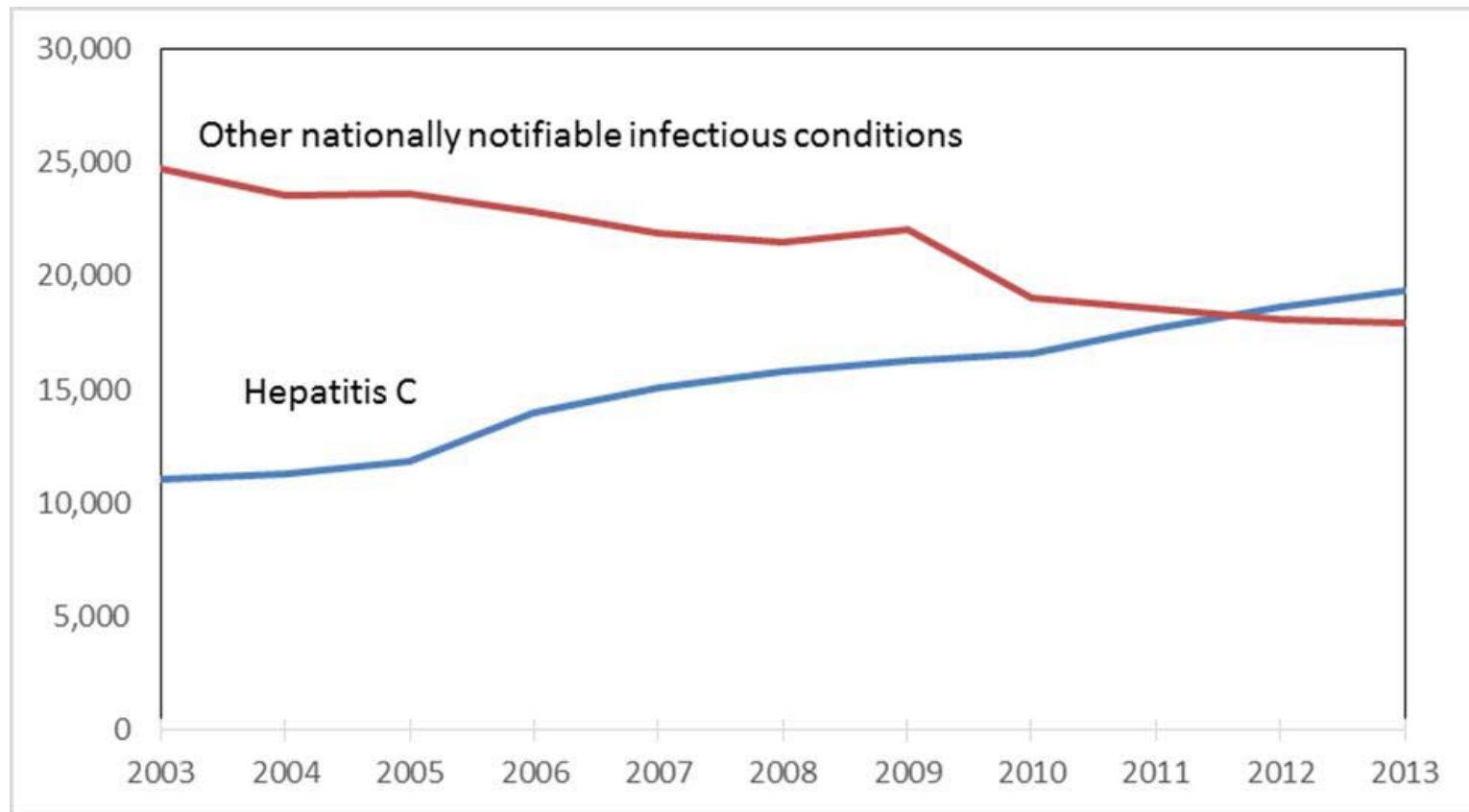
1. Case for HCV Elimination
2. Current HCV Treatment landscape- what is available and how well does it work
3. Whom to treat
4. Access to treatment
5. HCV in HIV at W86





Hepatitis C Elimination: Why Now?

HCV Deaths Exceed Deaths from 60 Other Infectious Diseases Combined



Other notifiable infectious conditions include HIV, tuberculosis, and hepatitis B

Global and U.S. Conversations about HCV Elimination - Why Now?

- The clock is ticking as HCV-related mortality rises.
- Almost all people with HCV can be cured with a short-course, well-tolerated, all-oral treatment.
- *HCV Cure as HCV Prevention*: Scaled up HCV treatment paired with prevention of reinfection can lead to HCV elimination.
- All people with HCV can benefit from a cure.

Recommendations for When and in Whom to Initiate Treatment

- **Treatment is recommended for all patients with chronic HCV infection, except those with short life expectancies that cannot be remediated by treating HCV, by transplantation, or by other directed therapy. Patients with short life expectancies owing to liver disease should be managed in consultation with an expert.**

Current HCV Treatment

HCV drug development is largely over so we have an essentially final treatment landscape

1) Glecapravir/Pibrentasvir (“Mavyret”)

- 3 Pills/once a day for 8-12 weeks



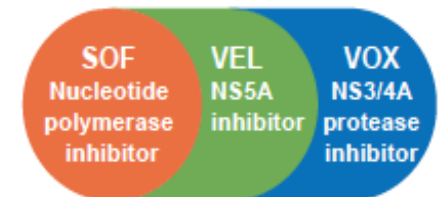
2) Sofosbuvir/Velpatasvir (“Eplcusa”)

- 1 pill once a day for 12 weeks



3) Sofosbuvir/velpatasvir/voxilaprevir (“Vosevi”)

- 1 pill once a day for 12 weeks



Current HCV Treatment

- Well tolerated with minimal side effects
 - Headache, Nausea, Fatigue most common and usually mild
- Highly effective- cure in >95%
- Options for previously hardest to treat: cirrhosis, kidney failure, prior treatment failure, etc.
- Equivalent regimens & outcomes in HIV(+)

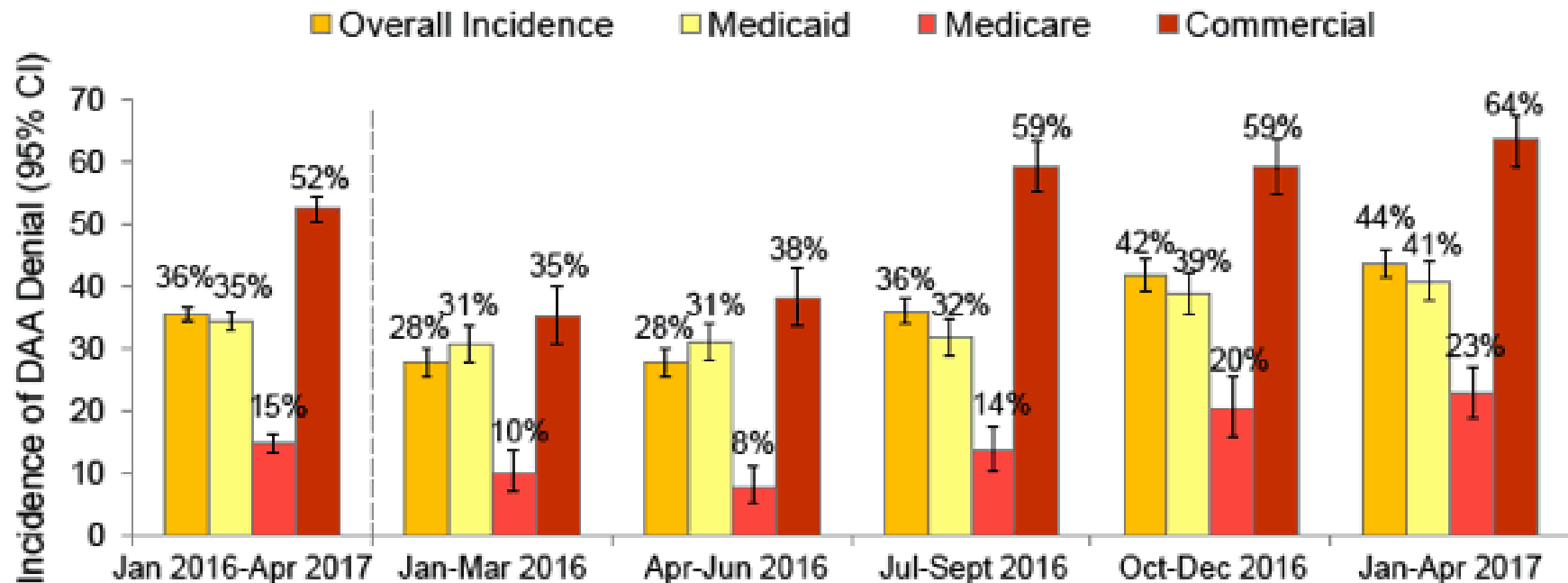
Access to treatment

- California Medi-Cal is changing as of 7/2018 to the AASLD/IDSA guidelines – treat *everyone* unless < 12 months to live
- No treatment restrictions based on liver fibrosis or on sobriety

2018-19 Governor's May Revision
Highlights
Department of Health Care Services

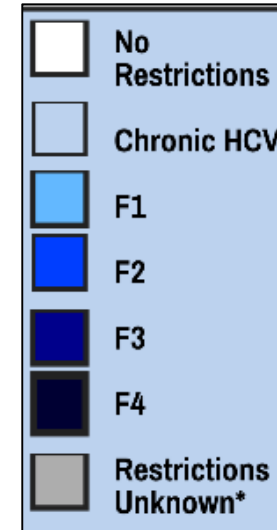
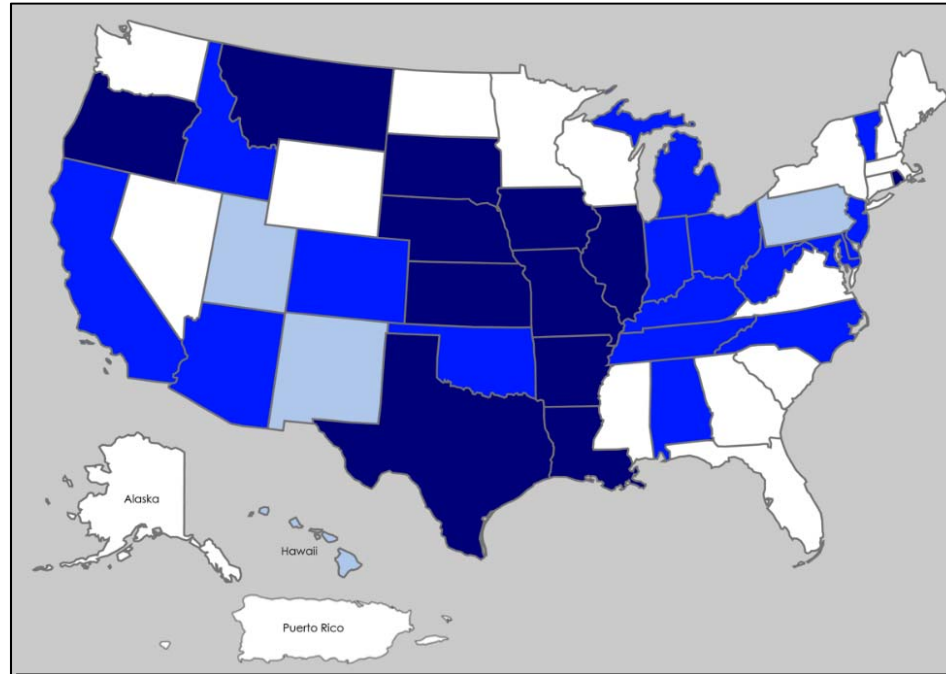


INCIDENCE OF DAA DENIAL OVER TIME

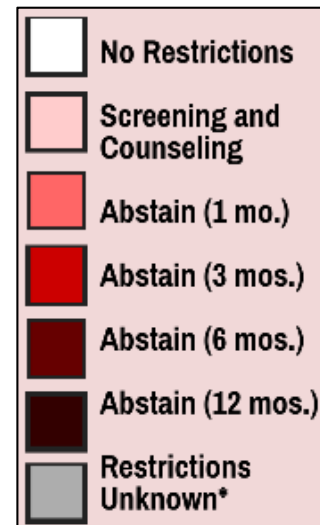
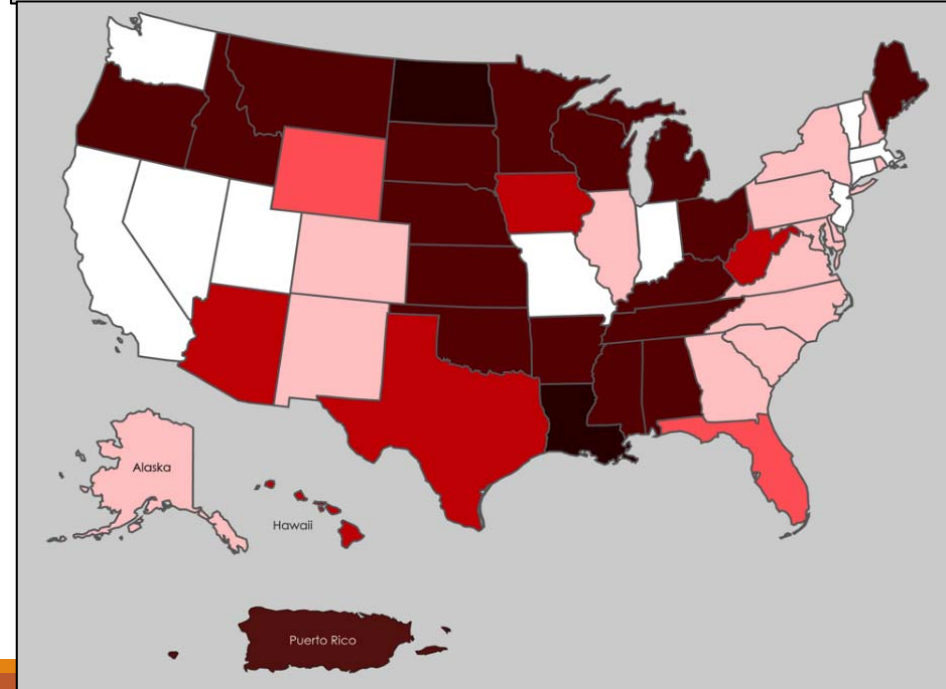


Gowda CID 2018

2017 Fibrosis based restrictions



2017 Sobriety based restrictions



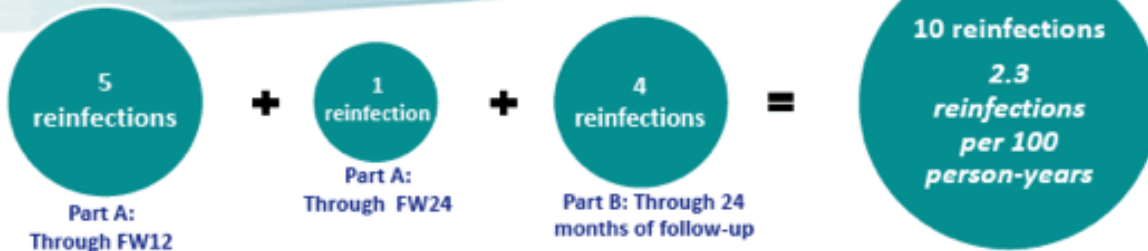
HCV at Ward 86

- **2017: 70** treatment starts
 - 1 possible reinfection, NO failures in those completing treatment
- Total treated since program inception: > **350**
- Remaining HCV infected: ≈ **100**
 - Challenges include comorbidities, poorly controlled HIV, inconsistent engagement in care
- **Goal:** Near elimination by 2019
- Much more intensive to reach this hardest-to-treat population

Reinfection: IDU & HIV(+) MSM



INCIDENCE OF REINFECTION



All Reinfections: From End of Treatment Through 24 Months of Follow-up		
• 10 reinfections	• 426 person-years	• 2.3 reinfections per 100 person-years (95% CI: 1.1, 4.3)
Persistent Reinfections: From End of Treatment Through 24 Months of Follow-up (includes only those participants with persistent HCV RNA)		
• 7 reinfections	• 429 person-years	• 1.6 reinfections per 100 person-years (95% CI: 0.7, 3.4)
Clearance of reinfection was observed in 3/10 (30%) reinfection cases		

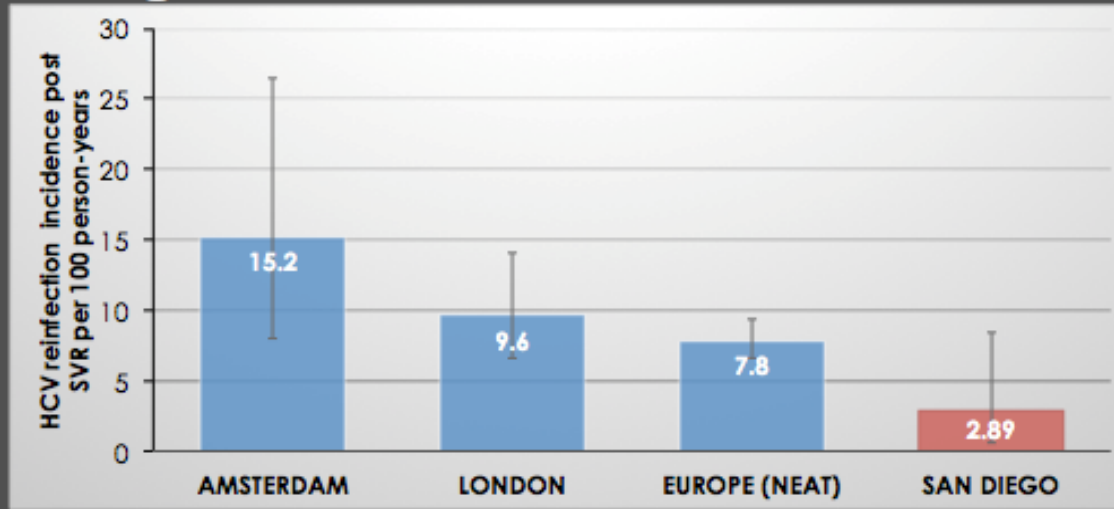
OASIS Methadone clinic, PILOT STUDY (n=35)

- ✓ *Substantial on-treatment substance use*
- ✓ *97% SVR in those who completed*
- ✓ *NO reinfections at one year.*

Sylvestre AASLD 2017

Dore AASLD 2017

HCV reinfection incidence after SVR among HIV+ MSM



Chaillon AASLD 2017

Resources



- <http://www.hcvguidelines.org>



- <http://www.hep-druginteractions.org>



- Free downloadable app
- VA website: <https://www.hepatitis.va.gov/products/patient/sofosbuvir-simeprevir-handouts.asp> (despite website name, has most current regimens)
- <http://harmreduction.org/issues/hepatitis-c/>



For More Information:
www.EndHepCSF.org



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End Hep C SF Steering Committee

End Hep C SF Community Partners

SFDPH

Ward 86 HCV program