

Glecaprevir-Pibrentasvir in Genotype 2 without Cirrhosis **ENDURANCE-2**

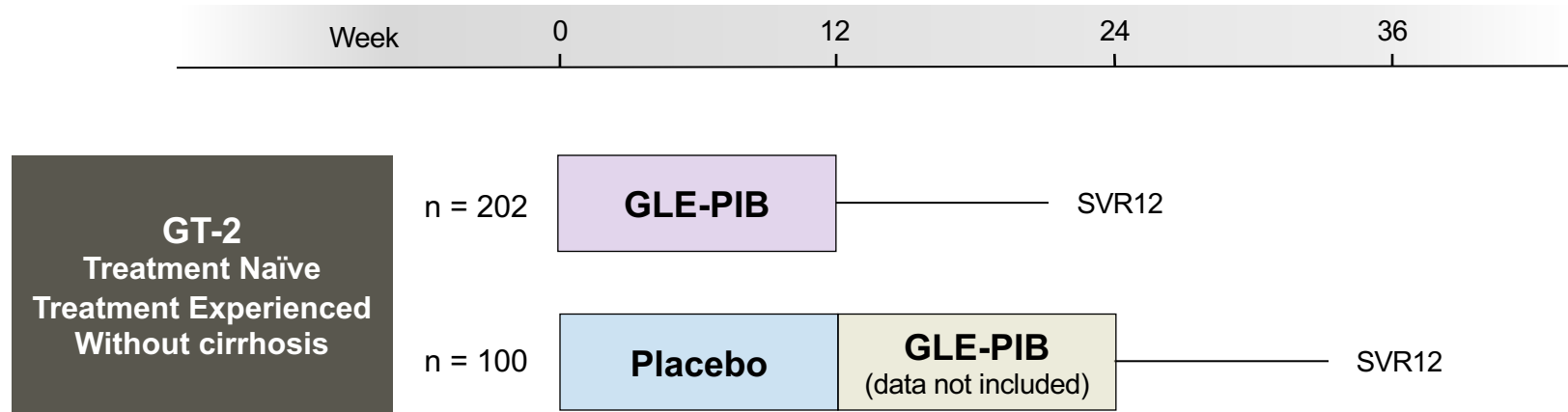
Glecaprevir-Pibrentasvir in Non-Cirrhotic GT 2

*ENDURANCE-2: Study Features

- **Design:** Randomized, double-blind, placebo-controlled, phase 3 trial to evaluate the safety and efficacy of the fixed-dose combination of glecaprevir-pibrentasvir for 12 weeks in treatment-naïve or treatment-experienced adults with GT 2 chronic HCV (without cirrhosis).
- **Setting:** Multiple centers in United States, Europe, and Asia
- **Key Eligibility Criteria**
 - Chronic HCV genotype 2
 - Age ≥ 18 years
 - HCV RNA $\geq 1,000$ IU/mL at screening
 - Naïve or treated with (1) PEG (or IFN) +/- RBV or (2) SOF + RBV +/- PEG
 - Absence of cirrhosis
 - HIV or HBV coinfection excluded
- **Primary End Point:** SVR12 time

***Note:** ENDURANCE-2 was published in conjunction with ENDURANCE-4 and SURVEYOR-II (Part 4)

Glecaprevir-Pibrentasvir in Non-Cirrhotic GT 2 ENDURANCE-2: Study Design



Note: Four patients enrolled in GT2 arm later determined to be infected with GT1 by phylogenetic analysis

Abbreviations: GLE-PIB = Glecaprevir-pibrentasvir

Drug Dosing: Glecaprevir-pibrentasvir (100/40 mg) fixed-dose combination, three pills (300/120 mg) once daily

Glecaprevir-Pibrentasvir in Non-Cirrhotic GT 2

ENDURANCE-2: Baseline Characteristics

Baseline Characteristic	GLE-PIB (n = 202)	Placebo (n = 100)
Age, mean ± SD, years	57 ± 12.8	58 ± 12.0
Male, n (%)	98 (49)	45 (45)
Race, n (%)		
White	121 (60)	60 (60)
Black	7 (3)	7 (7)
Asian	69 (34)	32 (32)
BMI, mean, ± SD kg/m ²	25.8 ± 4.7	26.4 ± 4.1
HCV RNA, median (range), log ₁₀ IU/mL	6.25 (2.5-7.3)	6.39 (3.4-7.2)
IL28B non-CC, n (%)	111 (55)	50 (50)
Former IDU, n (%)	32 (16)	18 (18)
*One patient in active arm with subtype 2i.		

Glecaprevir-Pibrentasvir in Non-Cirrhotic GT 2

ENDURANCE-2: Baseline Characteristics

Baseline Characteristic	GLE-PIB (n = 202)	Placebo (n = 100)
Fibrosis Stage, n (%)		
F0-1	154 (76)	85 (85)
F2	18 (9)	9 (9)
F3	30 (15)	6 (6)
Treatment-naïve, n (%)	141 (70)	71 (71)
Treatment-experienced, n (%)	61 (30)	29 (29)
IFN or PEG ± RBV, n (%)	55 (27)	27 (27)
SOF + RBV ± PEG, n (%)	6 (3)	2 (2)
Concomitant PPI use, n (%)	22 (11)	11 (11)

Glecaprevir-Pibrentasvir in Non-Cirrhotic GT 2

ENDURANCE-2: Baseline Polymorphisms

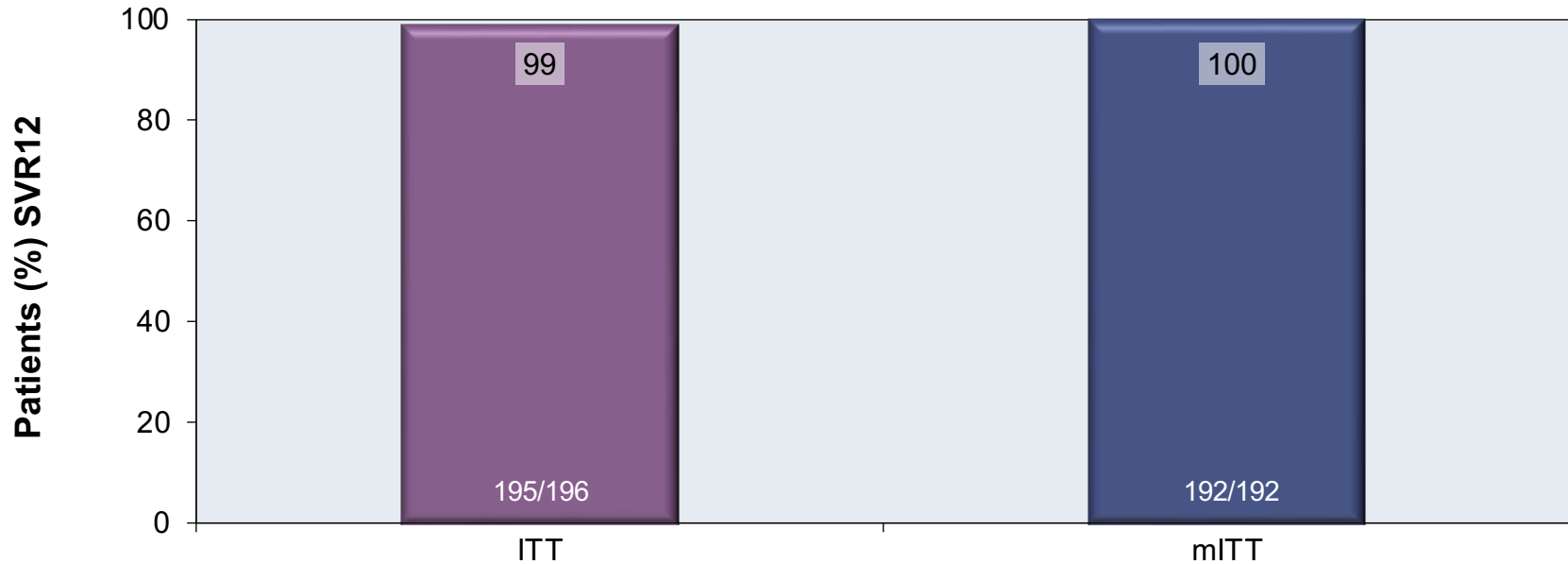
Prevalence of Baseline Polymorphism*, n (%)*	Genotype 2 (n = 160)
None	28 (18)
NS3 only	0
NS5A only	132 (83)
Both NS3 + NS5A	0

*Baseline polymorphisms detected by next generation sequencing at a 15% threshold in samples that had sequences available for both targets (N) at the following amino acid positions: NS3 at positions 155, 156, and 168; NS5A at positions 24, 28, 30, 31, 58, 92, and 93

Glecaprevir-Pibrentasvir in Non-Cirrhotic GT 2

ENDURANCE-2: Results

ENDURANCE-2: Overall SVR12, by Analysis



ITT (intent-to-treat): excludes 6 sofosbuvir-experienced patients, all of whom achieved SVR12
mITT (modified intent-to-treat): excludes patients with non-virologic failure and those with ineligible genotype

Glecaprevir-Pibrentasvir in Non-Cirrhotic GT 2

ENDURANCE-2: Adverse Events

Adverse Event (AE), n (%)	GLE-PIB 12 weeks (n = 202)	Placebo (n = 100)
Discontinuation due to AE	0	0
Serious Adverse Events (SAEs) [§]	3 (1)	1 (1)
Deaths	0	0
Any AE in >10% of patients		
Headache	24 (12)	12 (12)
Fatigue	23 (11)	10 (10)
Laboratory AEs		
AST elevation, grade 3-4 (>5x ULN)	2 (1)	1 (1)
ALT elevation, grade 3-4 (>5x ULN)*	1 (0.5)	2 (2)
Total bilirubin, grade 3 (3-10x ULN) [#]	1 (0.5)	0

[§] No serious AEs were deemed to be DAA-related; no SAEs led to drug discontinuation.
 Event occurred with grade 3 AST and grade 3 alkaline phosphatase elevation in context of cholelithiasis.
[#] Indirect hyperbilirubinemia; no associated ALT elevation. Declined with treatment.

Abbreviations: AST = aspartate aminotransferase; ALT = alanine aminotransferase; ULN = upper limit normal

Glecaprevir-Pibrentasvir in Non-Cirrhotic GT 2

*ENDURANCE-2: Conclusions

Conclusion: “The SVR12 rate in all genotype 2-infected patients treated for 12 weeks (including those with sofosbuvir experience) was 99.5%, with no virologic failures.”

***Note:** ENDURANCE-2 was published in conjunction with ENDURANCE-4 and SURVEYOR-II (Part 4)

Acknowledgments

Hepatitis C Online is funded by a cooperative agreement from the Centers for Disease Control and Prevention (CDC-RFA- PS21-2105). This project is led by the University of Washington Infectious Diseases Education and Assessment (IDEA) Program.



The contents in this presentation are those of the author(s) and do not necessarily represent the official position of views of, nor an endorsement, by the Centers for Disease Control and Prevention.