

Glecaprevir-Pibrentasvir in Patients with HCV-HIV Coinfection EXPEDITION-2

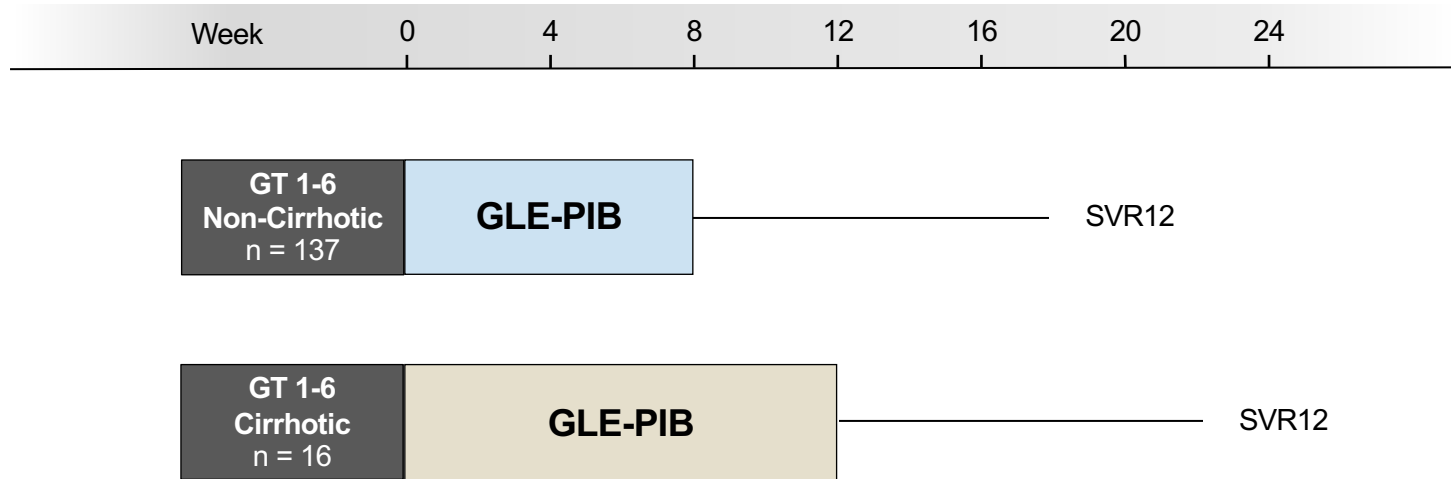
Glecaprevir-Pibrentasvir in HIV-HCV Coinfected Patients

EXPEDITION-2: Study Features

- **Design:** Open-label, phase 3 trial to evaluate the safety and efficacy of the fixed-dose combination of glecaprevir-pibrentasvir for 8 or 12 weeks in persons with HIV-HCV coinfection, without or with compensated cirrhosis
- **Setting:** Australia, Europe, Russian Federation, UK, US
- **Key Eligibility Criteria**
 - Adults with chronic HCV GT 1, 2, 3, 4, 5, or 6
 - HCV RNA $\geq 1,000$ IU/mL at screening
 - Naïve or treated with peginterferon +/- ribavirin (PR) or PR +/- sofosbuvir
 - Compensated cirrhosis allowed
 - On ART or ART-naïve with CD4 ≥ 500 cells/mm³ or CD4 percentage $\geq 29\%$
- **Primary End Point:** SVR12

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EXPEDITION-2: Study Design



Abbreviations: GLE-PIB = Glecaprevir-pibrentasvir

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

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EXPEDITION-2: Baseline Characteristics

Baseline Characteristic	GLE-PIB x 8 weeks (n = 137)	GLE-PIB x 12 weeks (n = 16)
Age, mean (range), years	45 (23-74)	50 (35-62)
Male, n (%)	113 (82)	15 (94)
White, n (%)	106 (77)	15 (94)
Black, n (%)	24 (18)	1 (6)
Genotype, n (%)		
1a	66 (48)	5 (31)
1b	21 (15)	5 (31)
2	9 (7)	1 (6)
3	22 (16)	4 (25)
4	16 (12)	1 (6)
6	3 (2)	0
Body mass index, median kg/m ² (range)	25 (18-41)	28 (22-38)
Median HCV RNA, log ₁₀ IU/mL (range)	6.2 (4.0-7.4)	6.1 (4.4-7.0)
Fibrosis Stage, n (%)		
F0-F1	122 (88)	0
F2	2 (1)	0
F3	15 (11)	0
F4	0	16 (100)

Source: Rockstroh JK, et al. Clin Infect Dis. 2018;67:1010-7.

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EXPEDITION-2: Baseline Characteristics

Baseline Characteristic	GLE-PIB x 8 weeks (n = 137)	GLE-PIB x 12 weeks (n = 16)
Treatment-experienced, n (%)	26 (19)	2 (13)
IFN-based, n/N (%)	23 (17)	2 (13)
SOF-based, n/N (%)	3 (2)	0
IDU within 12 months, n (%)	12 (9)	1 (6)
On opiate substitution therapy, n (%)	11 (8)	2 (13)
N(t)RTI backbone, n (%)		
Tenofovir disoproxil fumarate	74 (54)	13 (81)
Tenofovir alafenamide	6 (4)	0
Abacavir	49 (36)	3 (19)
Antiretroviral Anchor Agent, n (%)		
Raltegravir	39 (28)	6 (38)
Dolutegravir	62 (45)	5 (31)
Rilpivirine	27 (20)	5 (31)
Elvitegravir-cobicistat	1 (1)	0
Antiretroviral Therapy Naïve, n (%)	9 (7)	0
CD4 cell count ≥ 500 cells/mm ³	92 (67)	9 (56)

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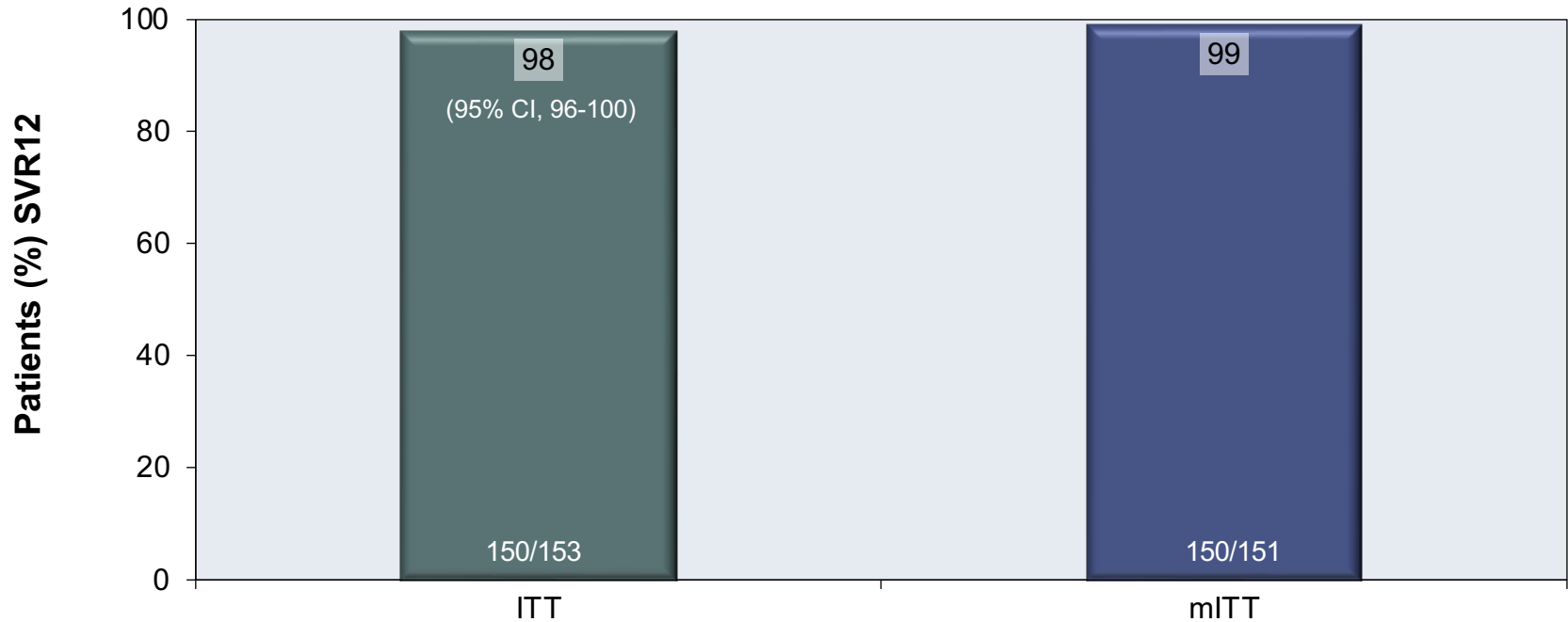
EXPEDITION-2: Baseline Polymorphisms

Baseline Polymorphisms*	GLE-PIB x 8 weeks (n = 130)	GLE-PIB x 12 weeks (n = 16)
None, n (%)	92 (71)	9 (56)
NS3 only, n (%)	1 (1)	1 (6)
NS5A only, n (%)	36 (28)	6 (38)
NS3 and NS5A, n (%)	1 (1)	0

*Detected at 15% threshold by next-generation sequencing in samples that had sequences available at a key subset of amino acid positions: NS3 at positions 55, 156, 168; NS5A at positions 24, 28, 30, 31, 58, 92, 93

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EXPEDITION-2: Results



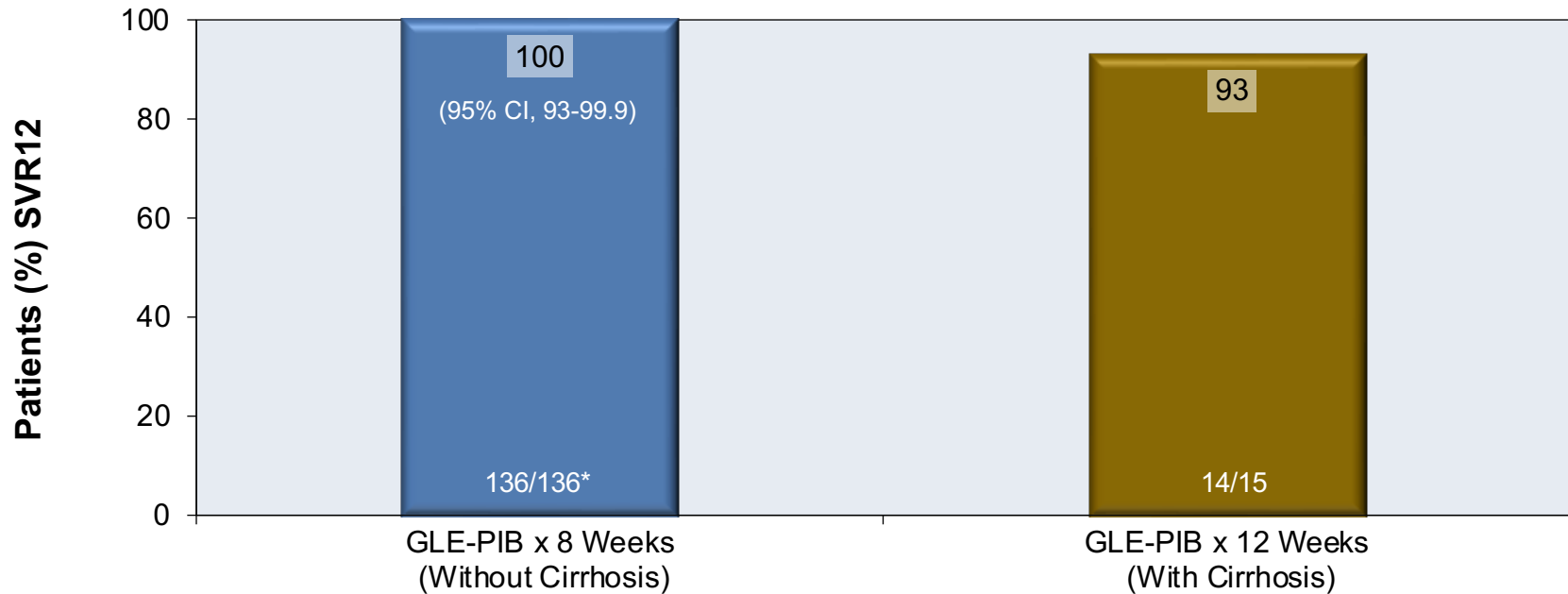
One GT3 patient with cirrhosis and 85% compliance had on-treatment virologic failure

Abbreviations: ITT = Intent-to-treat; mITT = modified intent-to-treat

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EXPEDITION-2: Results

EXPEDITION-2: Overall SVR by Treatment Regimen



*Excludes one patient with missing data who achieved SVR24

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EXPEDITION-2: Adverse Events

Adverse Event (AE), n (%)	GLE-PIB x 8 weeks (n = 137)	GLE-PIB x 12 weeks (n = 16)
Discontinuation due to AE	0	1 (6) [§]
Serious AEs	3 (2)*	1 (6) [§]
Any AE in ≥5% of patients		
Fatigue	18 (13)	0
Nausea	12 (9)	1 (6)
Headache	12 (9)	0
Nasopharyngitis	12 (9)	0
Laboratory AEs		
ALT elevation, grade ≥3 (>5x ULN)	0	0
AST elevation, grade ≥3 (>5x ULN)	0	0
Total bilirubin, grade ≥3 (3x ULN)	1 (0.7)	0

[§] One GT2 patient with cirrhosis experienced cerebrovascular accident and cerebral hemorrhage.
^{*} Upper GI bleed, obliterating arteriopathy and urolithiasis in one patient each, thought unrelated to G/P.

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

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EXPEDITION-2: Conclusions

Conclusion: “Glecaprevir/pibrentasvir for 8 weeks in non-cirrhotic and 12 weeks in cirrhotic patients is a highly efficacious and well-tolerated treatment for HCV/HIV-1 co-infection, regardless of baseline HCV viral load or prior treatment with interferon or sofosbuvir.”

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