Treatment-Naïve and Treatment-Experienced

Glecaprevir-Pibrentasvir for 8 Weeks in HCV GT 2, 4, 5, or 6 without Cirrhosis

SURVEYOR-II (Part 4)

Source: Asselah T, et al. Clin Gastroenterol Hepatol. 2018;16:417-26.

Glecaprevir-Pibrentasvir in HCV GT 2, 4, 5, or 6 without Cirrhosis *SURVEYOR-II (Part 4): Study Features

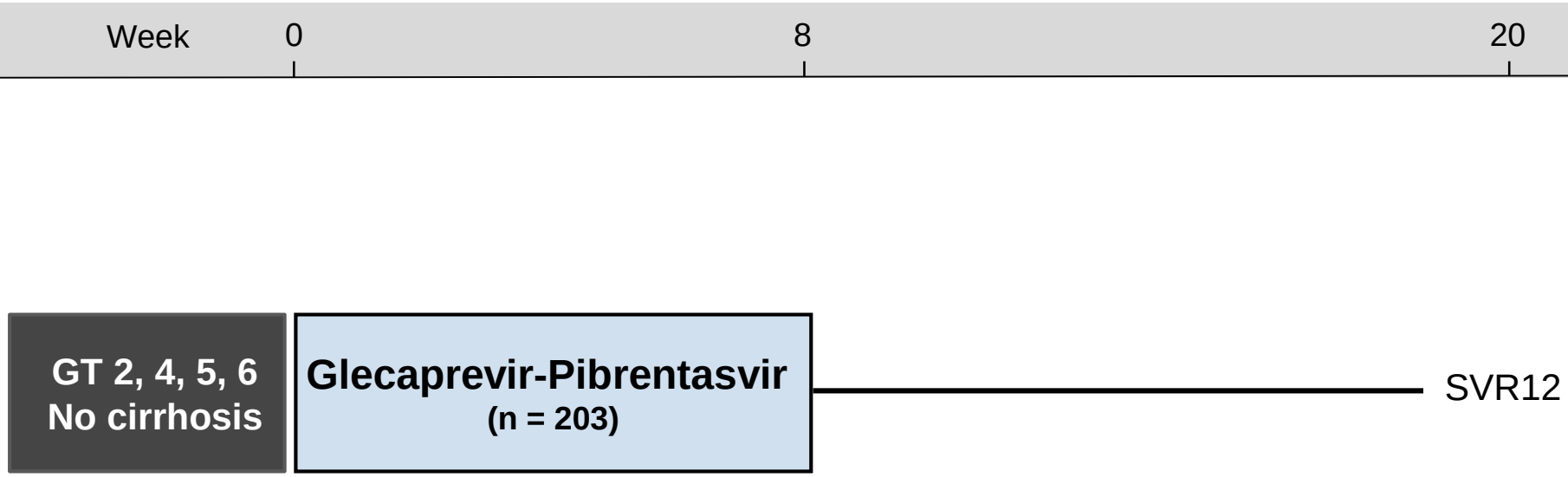
SURVEYOR-II (Part 4) Trial

- **Design**: Open-label single-arm phase 3 trial to evaluate the safety and efficacy of the fixed-dose combination of glecaprevir-pibrentasvir for 8 weeks in treatment-naïve and treatment-experienced adults with GT 2, 4, 5, or 6 chronic HCV infection without cirrhosis
- **Setting:** Canada, Europe, and South Africa
- **Key Eligibility Criteria**
  - Chronic HCV GT 4, 5 or 6
  - HCV RNA ≥1,000 IU/mL at screening
  - Treatment naïve
  - Prior treatment with (1) PEG (or INF) +/- RIB or (2) Sofosbuvir + RIB +/- PEG
  - Patients with cirrhosis excluded
  - Patients with HIV or chronic HBV excluded
- **Primary End-Point**: SVR12

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

Source: Asselah T, et al. Clin Gastroenterol Hepatol. 2018;16:417-26.

Glecaprevir-Pibrentasvir in HCV GT 2, 4, 5, or 6 without Cirrhosis
SURVEYOR-II (Part 4): Study Design



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

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Glecaprevir-Pibrentasvir in HCV GT 2, 4, 5, or 6 without Cirrhosis
SURVEYOR-II (Part 4): Baseline Characteristics

Baseline Characteristic	GT2 (n = 145)	GT 4-6 (n = 58)
Age, mean ± SD, years	54 ± 11.8	48 ± 13.8
Male, n (%)	61 (42)	37 (64)
Race, n (%) White Black Asian	 120 (83) 11 (8) 10 (7)	 35 (60) 10 (17) 13 (22)
BMI, mean ± SD, kg/m^2	28.5 ± 6.9	25.9 ± 5.0
HCV RNA, median (range), log_{10} IU/mL	6.67 (0.75-7.6)	5.45 (4.3-7.5)
HCV Treatment experienced, n (%) IFN or PEG ± RBV, n (%) SOF + RBV ± PEG, n (%)	18 (12) 12 (8) 6 (4)	9 (16) 9 (16) 0
Former IDU, n (%)	71 (49%)	21 (36)

Source: Asselah T, et al. Clin Gastroenterol Hepatol. 2018;16:417-26.

Glecaprevir-Pibrentasvir in HCV GT 2, 4, 5, or 6 without Cirrhosis SURVEYOR-II (Part 4): Baseline Characteristics

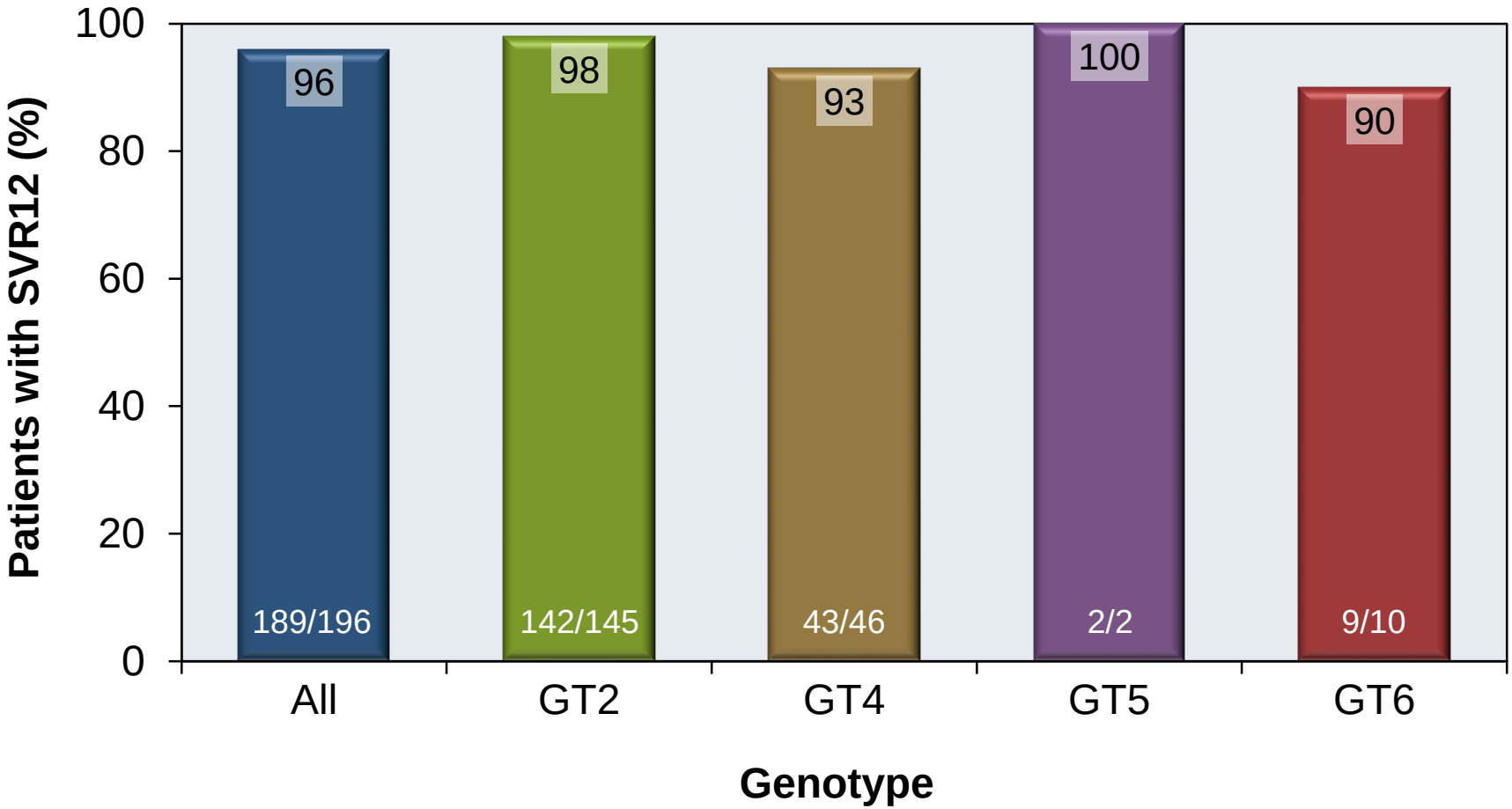
Prevalence of Baseline Amino Acid Polymorphisms* in NS3 or NS5A				
Genotype	Prevalence of Baseline Polymorphism, n (%)			
	GT2 (n = 123)	GT4 (n = 41)	GT5 (n = 1)	GT6 (n = 6)
None	29 (24)	23 (56)	1 (100)	2 (33)
NS3 only	0	0	0	0
NS5A only	93 (76)	17 (41%)	0	4 (67)
NS3 + NS5A	1 (0.8)	1 (2)	0	0 (9)

*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: 155, 156, 168
NS5A: 24, 28, 30, 31, 58, 92, 93

Source: Asselah T, et al. Clin Gastroenterol Hepatol. 2018;16:417-26.

Glecaprevir-Pibrentasvir in HCV GT 2, 4, 5, or 6 without Cirrhosis SURVEYOR-II (Part 4): Results

SVR12 (ITT analysis), Overall and by Genotype



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Glecaprevir-Pibrentasvir in HCV GT 2, 4, 5, or 6 without Cirrhosis SURVEYOR-II (Part 4): Results

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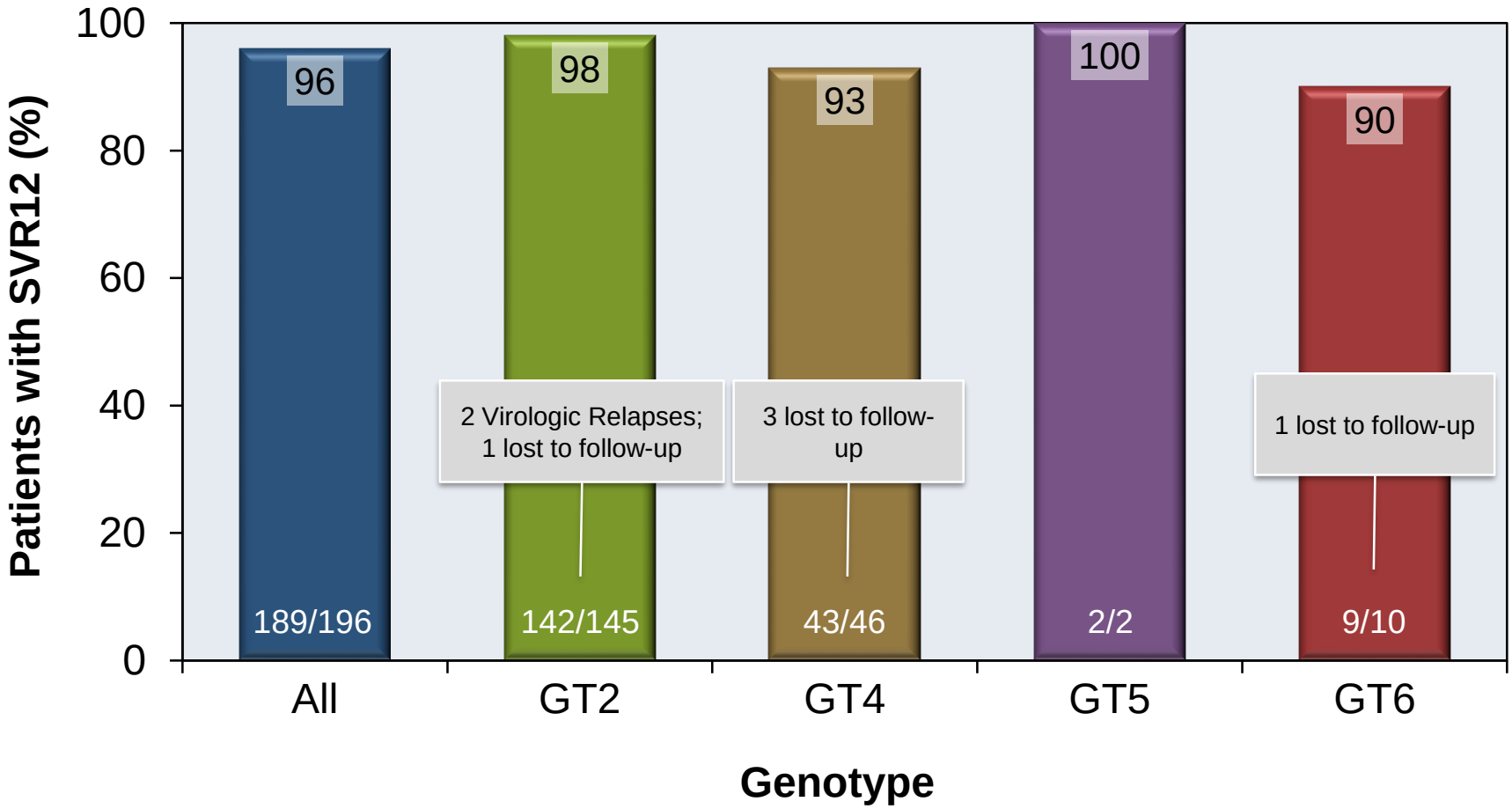

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Glecaprevir-Pibrentasvir in HCV GT 2, 4, 5, or 6 without Cirrhosis
SURVEYOR-II (Part 4): Adverse Events

Adverse Events (AEs), n (%)	Glecaprevir-Pibrentasvir (n = 121)
AEs leading to drug discontinuation	3 (2.5)*
Serious AEs	1 (0.8)§
AEs occurring in ≥10% of patients	
Fatigue	21 (17)
Headache	25 (21)
Laboratory AEs	
AST grade ≥2 (>3x ULN)	0
ALT grade ≥2 (>3x ULN)	0
Total bilirubin grade ≥3 (>3x ULN)	0

* One patient with anxiety, another with heartburn, third with transient ischemic attack (TIA).
§ Patient with baseline risk factors discontinued drug on day 12 due to TIA.

Source: Asselah T, et al. Clin Gastroenterol Hepatol. 2018;16:417-26.

Glecaprevir-Pibrentasvir in HCV GT 2, 4, 5, or 6 without Cirrhosis *SURVEYOR-II (Part 4): Conclusions

Conclusion: “In 3 Phase 3 studies, 8 weeks' treatment with glecaprevir/pibrentasvir produced an SVR12 in at least 93% of patients with chronic HCV genotype 2, 4, 5, or 6 infection without cirrhosis, with virologic failure in less than 1%. The drug combination had a safety profile comparable to 12 week's treatment with glecaprevir/pibrentasvir.”

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

Source: Asselah T, et al. Clin Gastroenterol Hepatol. 2018;16:417-26.