Treatment Naïve and Treatment Experienced (DAA Naïve), Phase 3

# Sofosbuvir-Velpatasvir versus Sofosbuvir-Velpatasvir-Voxilaprevir in DAA-Naïve GT 1-6 POLARIS-2

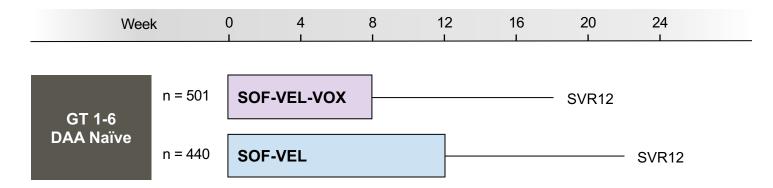


# SOF-VEL-VOX versus SOF-VEL in DAA-Naïve HCV GT 1-6 POLARIS-2: Study Features

- Design: Randomized, open-label, phase 3 trial to compare efficacy of sofosbuvirvelpatasvir-voxilaprevir (SOF-VEL-VOX) for 8 weeks versus sofosbuvir-velpatasvir (SOF-VEL) for 12 weeks in DAA-naïve patients with GT 1-6 chronic HCV infection.
- Setting: 117 sites in United States, Canada, New Zealand, Australia, France, Germany, and United Kingdom
- Entry Criteria
  - Age ≥18 years
  - Chronic HCV GT 1-6 (all GT 5, 6 assigned to SOF-VEL-VOX)
  - HCV RNA ≥10,000 IU/mL at screening
  - No prior treatment with DAA; prior peginterferon + ribavirin allowed
  - Patients with compensated cirrhosis allowed except if GT3
- Primary End Point: SVR12



## SOF-VEL-VOX versus SOF-VEL in DAA-Naïve HCV GT 1-6 POLARIS-2: Study Design



GT 3 patients with cirrhosis were enrolled in separate study (POLARIS-3) GT 1-4 randomized 1:1; all GT 5, 6 assigned to SOF-VEL-VOX Stratified by GT, cirrhosis, and prior treatment experience

Abbreviations: SOF = sofosbuvir; VEL = velpatasvir; VOX = voxilaprevir

**Drug Dosing** SOF-VEL-VOX (400/100/100 mg): fixed dose combination; one pill once daily SOF-VEL (400/100 mg): fixed dose combination; one pill once daily



# SOF-VEL-VOX versus SOF-VEL in DAA-Naïve HCV GT 1-6 POLARIS-2: Baseline Characteristics

Baseline Characteristic	SOF-VEL-VOX x 8 weeks (n = 501)	<b>SOF-VEL x 12 weeks</b> (n = 440)
Age, mean (range)	53 (18-78)	55 (19-82)
Male, n (%)	255 (51)	237 (54)
White, n (%)	391 (78)	365 (83)
HCV genotype—no. (%) 1a 1b 2 3 4 5 6	169 (34) 63 (13) 63 (13) 92 (18) 63 (13) 18 (4) 30 (6)	172 (39) 59 (13) 53 (12) 89 (20) 57 (13) 0 9 (2)*
Body mass index, mean kg/m <sup>2</sup> (range)	26.9 (16.9-57.3)	27.1 (17.9-54.0)
Mean HCV RNA, log <sub>10</sub> IU/mL (SD)	6.1 (0.75)	6.2 (0.66)
IL28B CC, n (%)	166 (33)	136 (31)
Cirrhosis, n (%)	90 (18)	84 (19)
Abbreviations: SD, standard deviation		

\* 9 patients with GT6 were assigned to SOF-VEL and initially misclassified as GT1

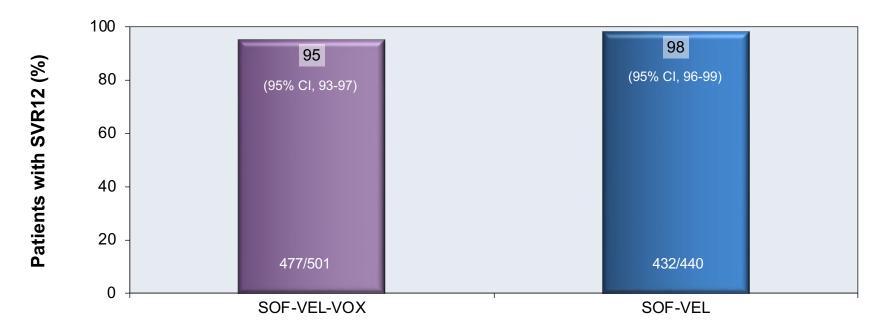


# SOF-VEL-VOX versus SOF-VEL in DAA-Naïve HCV GT 1-6 POLARIS-2: Baseline Characteristics

Information on Prior Treatment	<b>SOF-VEL-VOX</b> x 8 weeks (n = 501)	<b>SOF-VEL</b> x 12 weeks (n = 440)
Treatment-Naïve	383 (76)	340 (77)
Treatment-Experienced	118 (24)	100 (23)
Peginterferon + Ribavirin	93 (79)	81 (81)
Other	25 (21)	19 (19)
Most Recent Treatment Response		
Nonresponder	50 (42)	47 (47)
Relapse	55 (47)	44 (44)
Other	13 (11)	9 (9)

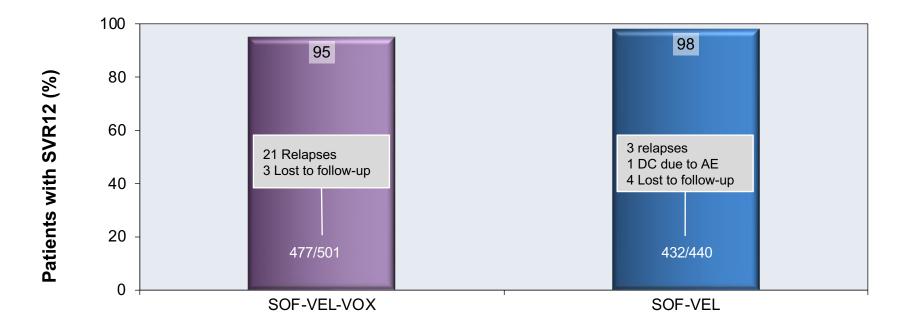


#### POLARIS-2: Overall SVR12 by Treatment Arm



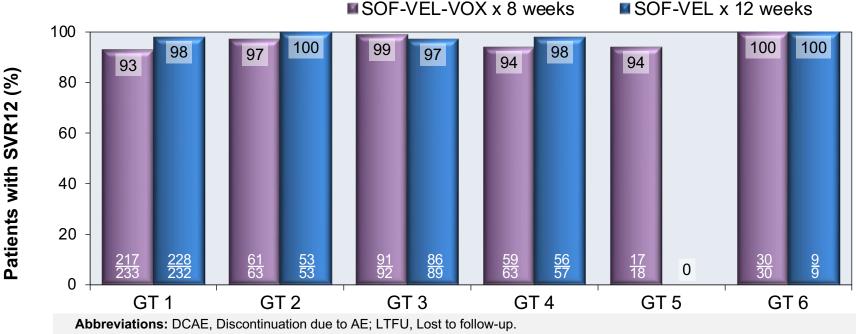


#### POLARIS-2: Overall SVR12 by Treatment Arm





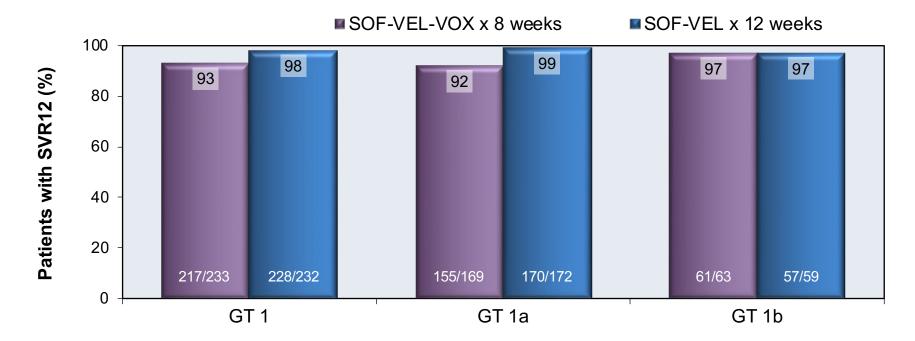
#### POLARIS-2: SVR by Treatment Arm and Genotype



Two patients had unknown genotype were assigned to SOF-VEL-VOX and went on to achieve SVR12

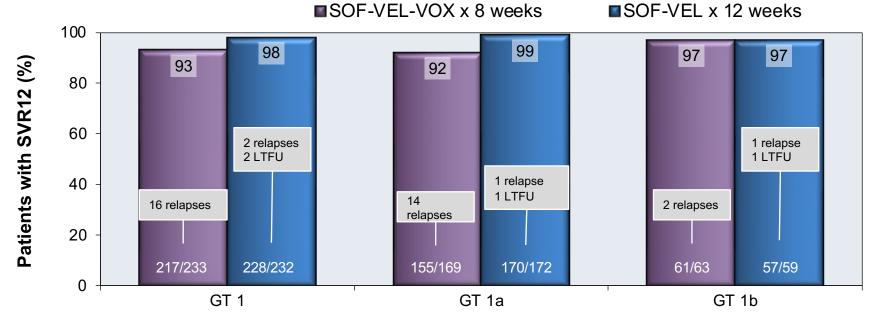


#### POLARIS-2: SVR by Treatment Arm and Genotype 1 Subtype





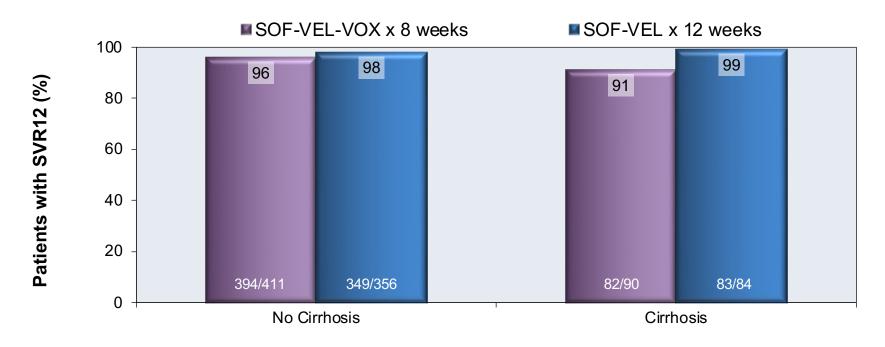
#### POLARIS-2: SVR by Treatment Arm & Genotype 1 Subtype



Abbreviations: LTFU, Lost to follow-up

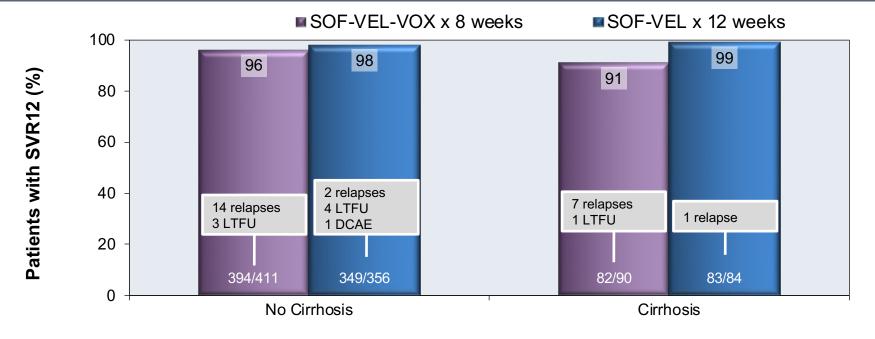


#### POLARIS-2: SVR12 by Cirrhosis Status



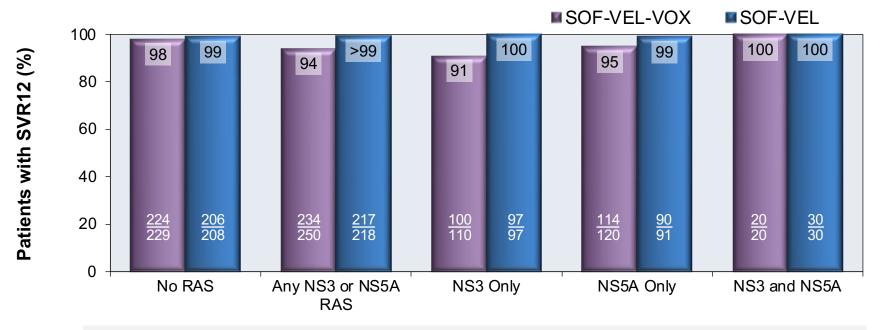


#### POLARIS-2: SVR12 by Cirrhosis Status





#### POLARIS-2: SVR12 by Baseline RASs\*



\* Using a 15% reporting threshold



Adverse Event (AE), n (%)	<b>SOF-VEL-VOX</b> x 8 weeks (n = 501)	<b>SOF-VEL</b> x 12 weeks (n = 440)
Discontinuation due to AE	0	2 (<1)§
Serious AE	15 (3)	7 (2)
Serious Related AE	0	0
Deaths	0	0
Any AE in >10% of patients Headache Fatigue Diarrhea Nausea	134 (27) 106 (21) 88 (18) 80 (16)	99 (23) 90 (20) 32 (7) 40 (9)
Laboratory AEs (Grade 3-4)	24 (5)	16 (4)

<sup>§</sup> One patient discontinued due to upper respiratory infection; 1 patient due to C. difficile infection. Neither were considered related to study medication by investigator.



### SOF-VEL-VOX versus SOF-VEL in DAA-Naïve HCV GT 1-6 POLARIS-2: Conclusions

**Conclusions**: "In phase 3 trials of patients with HCV infection, we did not establish that sofosbuvir-velpatasvir-voxilaprevir for 8 weeks was noninferior to sofosbuvir-velpatasvir for 12 weeks, but the 2 regimens had similar rates of SVR in patients with HCV genotype 3 and cirrhosis. Mild gastrointestinal adverse events were associated with treatment regimens that included voxilaprevir."



# 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.







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