**Treatment Naïve** 

# Simeprevir + PEG + RBV in Treatment-Naïve Genotype 1 QUEST-2 Trial



### **QUEST-2 Trial: Features**

- Design: Randomized, double-blind, placebo-controlled, phase 3 trial of simeprevir + PEG + RBV versus PEG + RBV in HCV GT1
- Setting: Multicenter at 76 sites in 14 countries

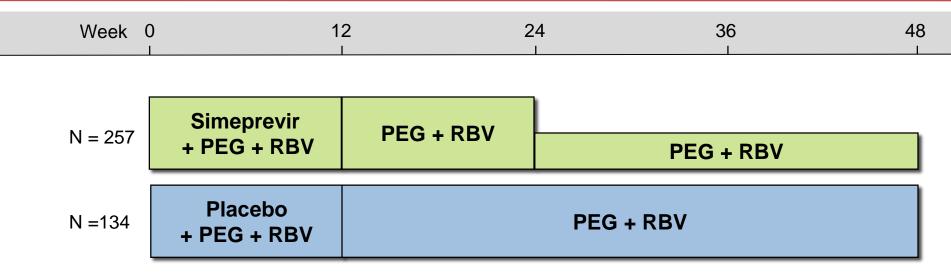
### Entry Criteria

- Treatment-naïve, chronic HCV monoinfection
- HCV Genotypes 1a or 1b

### Patient Characteristics

- N = 391
- HCV Subtype: 1a (41%); 1b (58%); other (<1%)
- IL28B Genotype: 30% CC
- Age and Sex: median age 46; 55% male
- Race: 92% white
- Liver disease: 14% with F3; 6% with F4
- Primary end-points: Efficacy (SVR12) and safety





#### **Study Notes**

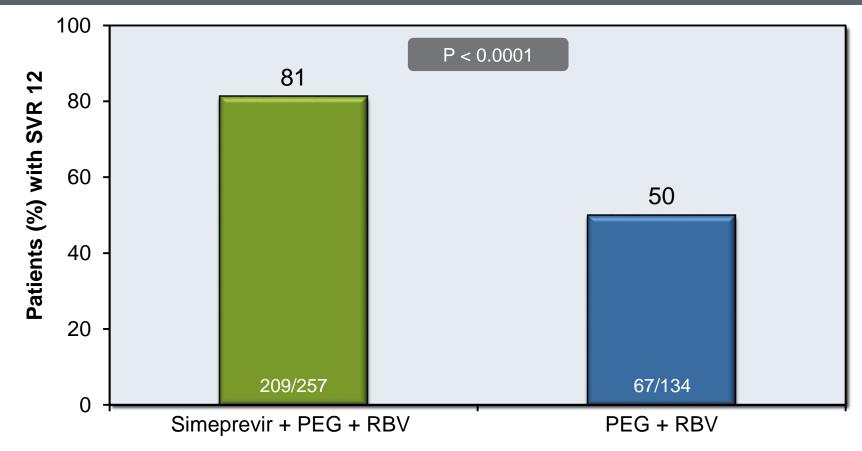
- Randomized 2:1, stratified on IL28B and HCV subtype
- 63% in each arm randomized to receive PEG alfa-2a or PEG alfa-2b; remainder assigned PEG alfa-2a
- Response-guided therapy (RGT): In simeprevir study arm, patients with HCV RNA<25 IU/ml at week 4 (undetectable or detectable) and <25 IU/ml at week 12 (undetectable) stopped treatment after 24 weeks</li>

#### Drug Dosing

Simeprevir: 150 mg once daily Peginterferon alfa-2a (PEG): 180 mcg/week OR Peginterferon alfa-2b: 1.5 mcg/kg/week Ribavirin (RBV) weight-based (in 2 divided doses): 1000 mg/day if < 75 kg or 1200 mg/day if ≥ 75 kg



### QUEST 2: Proportion of Patients with SVR12

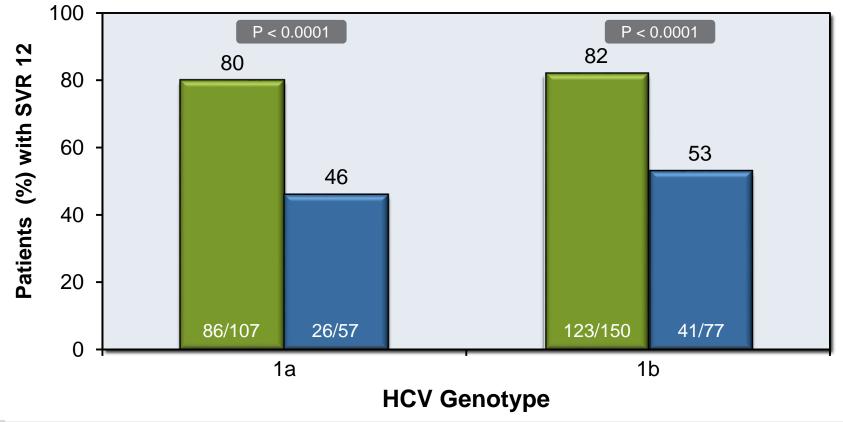


Abbreviations: SVR12 = sustained virologic response at 12 weeks; PEG = peginterferon; RBV = ribavirin



### QUEST 2: SVR12 by HCV Genotype 1 Subtype

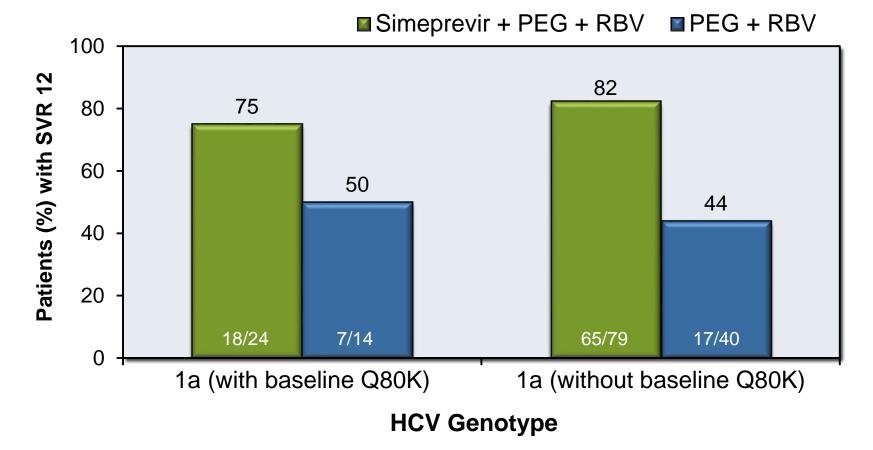
Simeprevir + PEG + RBV PEG + RBV



Abbreviations: SVR12 = sustained virologic response at 12 weeks; PEG = peginterferon; RBV = ribavirin



### QUEST 2: SVR12 for HCV 1a by Baseline Q80K Status



Abbreviations: SVR12 = sustained virologic response at 12 weeks; PEG = peginterferon; RBV = ribavirin

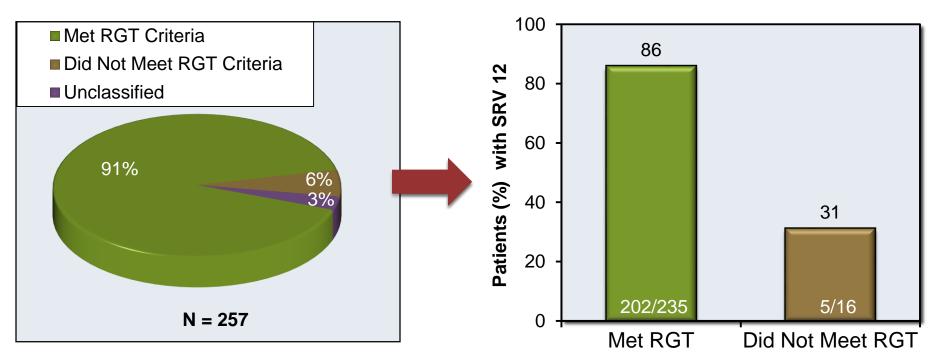
#### Source: Manns M, et al. Lancet. 2014;384:414-26.

#### Hepatitis web study

### QUEST 2: SVR12 Response in Simeprevir Arm Based on RGT Criteria

### Patients (%) who Met RGT Criteria

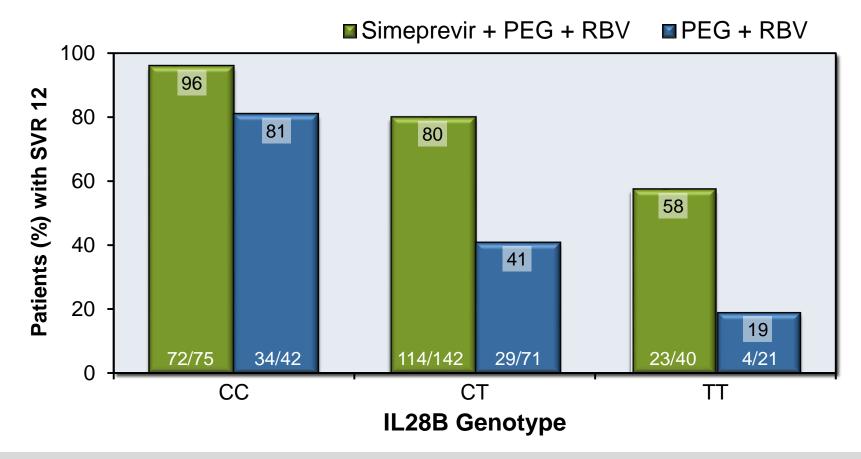
### SVR 12 Based on Meeting RGT



RGT= response-guided therapy: in simeprevir study arm, patients with HCV RNA<25 IU/ml at week 4 (undetectable or detectable) and <25 IU/ml at week 12 (undetectable) stopped treatment after 24 weeks



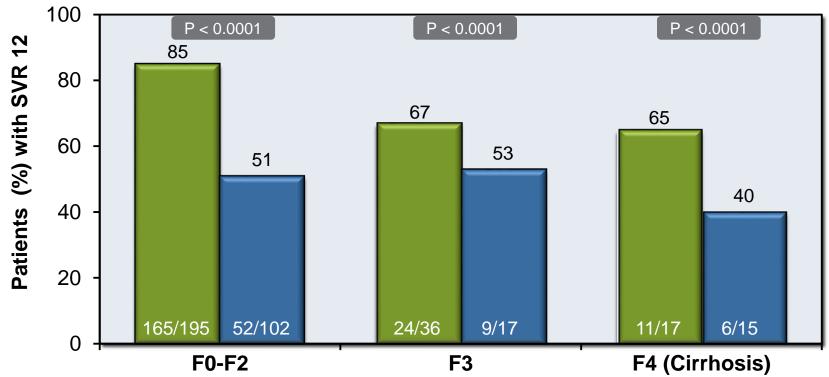
### QUEST 2: SVR12 by Host *IL28B* Genotype



Abbreviations: SVR12 = sustained virologic response at 12 weeks; PEG = peginterferon; RBV = ribavirin



### QUEST 2: SVR12 by Liver Fibrosis (Metavir Score)

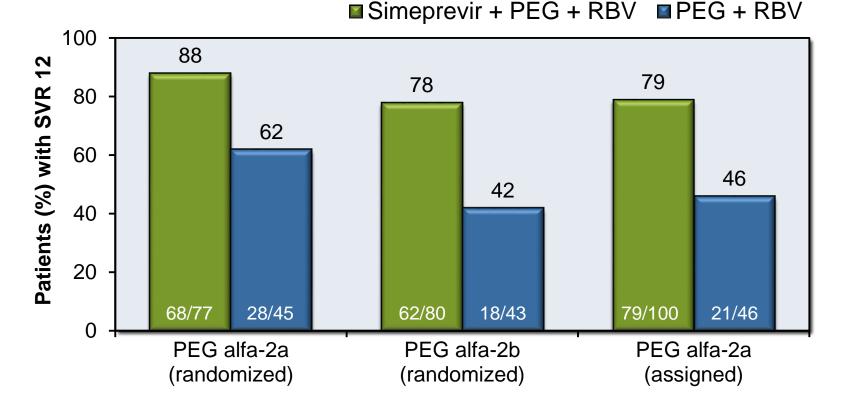


### ■ Simeprevir + PEG + RBV ■ PEG + RBV

Abbreviations: SVR12 = sustained virologic response at 12 weeks; PEG = peginterferon; RBV = ribavirin



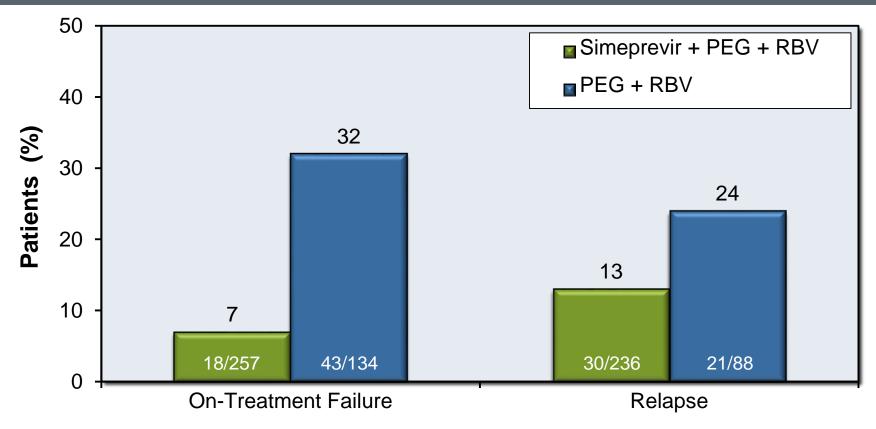
## SVR12 by Type of Peginterferon



Type of PEG: 63% of patients randomized to receive PEG alfa-2a versus alfa-2b; remainder assigned PEG alfa-2a Abbreviations: SVR12 = sustained virologic response at 12 weeks; PEG = peginterferon; RBV = ribavirin



QUEST 2: Patients Who Had On-Treatment Failure or Relapse



Abbreviations: PEG = Peginterferon; RBV = Ribavirin On-Treatment Failure: Detectable HCV RNA at end of treatment.



QUEST 2: Event	Simeprevir + PEG/RBV (n=257)	Placebo + PEG/RBV (n=134)
Discontinuation (due to adverse event)	<1%	<1%
Grade 3 adverse event	27%	31%
Grade 4 adverse event	6%	4%
Headache	39%	37%
Fatigue	37%	42%
Pyrexia	31%	40%
Influenza-like illness	26%	26%
Rash (any type)	27%	20%
Pruritus	26%	27%
Photosensitivity reactions	4%	<1%
Anemia	21%	28%
Neutropenia	21%	27%



QUEST 2: Emergent Resistance in Patients who Failed to Achieve SVR12

- Among simeprevir-treated patients who failed to achieve SVR12, emergent mutations in NS3 protease domain detected in 98%
- Genotype 1A: Most common mutation = R155K alone or in combination with mutations at codons 80 and/or 168
- Genotype 1B: Most common mutation = D168V and Q80R + D168E



Interpretation: "Addition of simeprevir to either peginterferon alfa 2a or peginterferon alfa 2b plus ribavirin improved SVR in treatment-naive patients with HCV genotype 1 infection, without worsening the known adverse events associated with peginterferon alfa plus ribavirin."



This slide deck is from the University of Washington's *Hepatitis C Online* and *Hepatitis Web Study* projects.

Hepatitis C Online www.hepatitisc.uw.edu

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