

All-oral, DAA options for HCV effective and well tolerated in patients with decompensated cirrhosis

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Interim data presented today at The International Liver Congress 2015 from the HCV-TARGET study show that all-oral, direct-acting antiviral therapy for hepatitis C (HCV) is well tolerated and highly effective in patients with decompensated cirrhosis. Sustained virologic response (SVR) at 4 weeks was shown to be: sofosbuvir/ribavirin: 75%; sofosbuvir/simeprevir: 77%; sofosbuvir/simeprevir/ribavirin: 81%.

These results demonstrate that all-oral, direct-acting antiviral regimens are better tolerated and achieve higher rates of SVR in HCV patients with decompensated cirrhosis than older interferon-based therapy.

Importantly, markers of hepatic and synthetic liver function such as bilirubin and albumin values also improved during short-term follow-up. The analyses were restricted to patients with cirrhosis and a MELD score (scoring system to assess the severity of chronic liver disease) of \leq 10 who had not undergone liver transplantation. Such well tolerated and highly efficacious therapy which can improve liver function presents an excellent option for many [patients](#) who do not have access to liver transplantation.

HCV-TARGET is an international research consortium of leading HCV investigators who have established a common research database and are conducting a longitudinal observational study to answer important questions about HCV therapy with direct-acting antiviral agents.

Provided by European Association for the Study of the Liver

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