

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 ≤ 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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