

**Effectiveness and safety of SOF/VEL containing rescue therapy in treating chronic**

**HCV-GT4 patients previously failed NS5A inhibitors-based DAAs**

فعالية وسلامة العلاج الإنقاذي المحتوي على SOF/VEL في علاج مرضى الالتهاب الكبدي المزمن من النوع الرابع HCV-GT4 الذين فشلوا سابقاً في استخدام مثبطات NS5A القائمة على الادويه المضادة للفيروسات المباشرة

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**Abstract**

Background and aims NS5A inhibitors are an important option for treating chronic HCV-GT4 patients. Retreatments after NS5A-based DAAs failure are limited. We aimed to determine the effectiveness and safety of SOF/VEL-containing regimens for HCV retreatment after NS5A-regimen failure. Methods Prospective cohort study assessing the efficacy and safety of retreatment with SOF/VEL in addition to either voxil aprevir or ribavirin in patients who had failed previous NS5A-based DAA treatment. The primary outcome was SVR12. Safety and tolerability data were collected. Results One hundred fifty patients were included. The mean age was 53 years, 64% were male, and 50% of included patients had liver cirrhosis, with a mean FIB-4 score of 3.12 ( $\pm$  2.30) and Child-Turcotte-Pugh (CTP) score of 7.27( $\pm$  0.48), and failed previous SOF/DCV + RBV, they were assigned to 24 weeks of SOF/VEL + RBV. The remaining 50%of participants had no liver cirrhosis and failed previous SOF/DCV, they were assigned to 12 weeks of treatment with SOF/VEL/VOX. Overall, SVR12 was achieved by 96% (n = 144/150) of included patients; 97.33% for SOF/VEL/VOX and 94.67% for SOF/VEL/RBV. Thirty-one patients experienced mild AEs; the most commonly reported mild A Ein the SOF/VEL + RBV group was hyperbilirubinemia (n = 9) whereas in the SOF/VEL/VOX group were headache (n = 4)and vertigo (n = 4). Only one patient in SOF/VEL + RBV reported moderate treatment-related AE in the form of anemia and no reported severe AE. Conclusion Retreatment of non-cirrhotic patients with 12 weeks SOF/VEL/VOX and treatment of cirrhotic patients with 24 weeks with SOF/VEL + RBV after the failure of first-line NS5A-based therapy was an effective and well-tolerated treatment option.