Peginterferon/Ribavirin-Experienced, Genotype 2 Patients Without Cirrhosis

Recommended regimens listed by evidence level and alphabetically for:

<table>
<thead>
<tr>
<th>RECOMMENDED</th>
<th>DURATION</th>
<th>RATING</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daily fixed-dose combination of glecaprevir (300 mg)/pibrentasvir (120 mg)</td>
<td>8 weeks</td>
<td>I, A</td>
</tr>
<tr>
<td>Daily fixed-dose combination of sofosbuvir (400 mg)/velpatasvir (100 mg)</td>
<td>12 weeks</td>
<td>I, A</td>
</tr>
</tbody>
</table>

*a Dosing is 3 coformulated tablets (glecaprevir [100 mg]/pibrentasvir [40 mg]) taken once daily. Please refer to the prescribing information.

**Glecaprevir/Pibrentasvir**

The SURVEYOR-II, part 4 trial was a single-arm study of the daily fixed-dose combination of glecaprevir (300 mg)/pibrentasvir (120 mg) administered as three 100 mg/40 mg fixed-dose combination pills for 8 weeks in noncirrhotic patients with genotype 2, 4, 5, or 6 who were treatment-naive or -experienced (interferon or peginterferon ± ribavirin, or sofosbuvir plus ribavirin ± peginterferon) ([Asselah, 2018b](#)). One hundred forty-five genotype 2 patients were enrolled with a 98% SVR12. Two patients experienced relapse; both were treatment experienced.

**Sofosbuvir/Velpatasvir**

In the randomized, open-label ASTRAL-2 study, genotype 2 patients were treated with 12 weeks of the daily fixed-dose combination of sofosbuvir (400 mg)/velpatasvir (100 mg) or sofosbuvir plus ribavirin ([Foster, 2015a](#)). Of the 266 participants, a minority (15%) had a history of previous peginterferon/ribavirin treatment failure and a similar proportion (14%) had compensated cirrhosis. Overall, the combination of sofosbuvir/velpatasvir yielded a statistically significant superior SVR12 rate of 99% vs 94% for sofosbuvir plus ribavirin. The only treatment failure in the sofosbuvir/velpatasvir arm was a patient who withdrew from the study after a single day due to side effects (anxiety). In contrast, there were 6 virologic failures in the sofosbuvir plus ribavirin arm. Fatigue and anemia were more commonly reported in patients receiving sofosbuvir plus ribavirin.

The phase 3 POLARIS-2 study randomized patients to 8 weeks of the fixed-dose combination of sofosbuvir/velpatasvir/voxilaprevir versus 12 weeks of sofosbuvir/velpatasvir. Fifty-three genotype 2 patients were in the sofosbuvir/velpatasvir arm and all achieved SVR (100%, 53/53) ([Jacobson, 2017](#)). This study confirms the high efficacy and safety of this 12-week regimen in patients with genotype 2, including those with a past peginterferon/ribavirin treatment failure and patients with compensated cirrhosis.

**Last update:** November 6, 2019
Related References

