

Patients With Decompensated Cirrhosis

Recommended for All Patients With HCV Infection Who Have Decompensated Cirrhosis

RECOMMENDED	RATING
Patients with HCV infection who have decompensated cirrhosis—moderate or severe hepatic impairment, ie, Child-Turcotte-Pugh (CTP) class B or class C—should be referred to a medical practitioner with expertise in that condition, ideally in a liver transplant center.	I, C

Decompensated Cirrhosis Genotype 1-6

Recommended regimens listed by pangenotypic, evidence level and alphabetically for:

Patients With Decompensated Cirrhosis^a Who Have Genotype 1-6 and Are Ribavirin Eligible

RECOMMENDED	DURATION	RATING
Genotype 1-6: Daily fixed-dose combination of sofosbuvir (400 mg)/velpatasvir (100 mg) with weight-based ribavirin ^b	12 weeks	I, A ^c
Genotype 1, 4, 5, or 6 only: Daily fixed-dose combination of ledipasvir (90 mg)/sofosbuvir (400 mg) with low initial dose of ribavirin (600 mg, increase as tolerated to weight-based dose)	12 weeks	I, A ^d

^a Includes CTP class B and class C patients who may or may not be candidates for liver transplantation, including those with hepatocellular carcinoma.

^b Low initial dose of ribavirin (600 mg) is recommended for patients with CTP class C cirrhosis; increase as tolerated.

^c Only available data for genotype 6 are in patients with compensated cirrhosis.

^d Only available data for genotypes 5 and 6 are in a small number of patients with compensated cirrhosis.

Recommended regimens listed by pangenotypic, evidence level and alphabetically for:

Patients With Decompensated Cirrhosis^a Who Have Genotype 1-6 and Are Ribavirin Ineligible

RECOMMENDED	DURATION	RATING
Genotype 1-6: Daily fixed-dose combination of sofosbuvir (400 mg)/velpatasvir (100 mg)	24 weeks	I, A ^b
Genotype 1, 4, 5, or 6 only: Daily fixed-dose combination of ledipasvir (90 mg)/sofosbuvir (400 mg)	24 weeks	I, A ^c

^a Includes CTP class B and class C patients who may or may not be candidates for liver transplantation, including those with hepatocellular carcinoma.

^b Only available data for genotype 6 are in patients with compensated cirrhosis.

^c Only available data for genotypes 5 and 6 are in a small number of patients with compensated cirrhosis.

Recommended regimens listed by pangenotypic, evidence level and alphabetically for:

Patients With Decompensated Cirrhosis^a and Genotype 1-6 Infection in Whom Prior Sofosbuvir- or NS5A Inhibitor-Based Treatment Failed

RECOMMENDED	DURATION	RATING
Genotype 1-6: Daily fixed-dose combination of sofosbuvir (400 mg)/velpatasvir (100 mg) with weight-based ribavirin ^b	24 weeks	II, C ^c
Prior sofosbuvir-based treatment failure, genotype 1, 4, 5, or 6 only: Daily fixed-dose combination of ledipasvir (90 mg)/sofosbuvir (400 mg) with low initial dose of ribavirin (600 mg; increase as tolerated)	24 weeks	II, C ^d

^a Includes CTP class B and class C patients who may or may not be candidates for liver transplantation, including those with hepatocellular carcinoma.

^b Low initial dose of ribavirin (600 mg) is recommended for patients with CTP class C cirrhosis.

^c Only available data for genotypes 5 and 6 are in a small number of patients with compensated cirrhosis.

^d Only available data for genotype 6 are in patients with compensated cirrhosis.

Regimens not recommended for:

Patients With Decompensated Cirrhosis (Moderate or Severe Hepatic Impairment; Child-Turcotte-Pugh Class B or C)

NOT RECOMMENDED	RATING
Any protease inhibitor-containing regimen (eg, glecaprevir, grazoprevir, and voxilaprevir).	III, B
Interferon-based regimens	III, B

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