

Patients With Decompensated Cirrhosis

Recommended for All Patients With HCV Infection Who Have Decompensated Cirrhosis ⁱ

RECOMMENDED	RATING ⁱ
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, 4, 5, or 6 Infection

Recommended regimens listed by evidence level and alphabetically for:

Patients With Decompensated Cirrhosis^a Who Have Genotype 1, 4, 5, or 6 Infection and Are Ribavirin Eligible

RECOMMENDED	DURATION	RATING ⁱ
Daily fixed-dose combination of ledipasvir (90 mg)/sofosbuvir (400 mg) with low initial dose of ribavirin (600 mg, increase as tolerated)	12 weeks	I, A ^b
Daily fixed-dose combination of sofosbuvir (400 mg)/velpatasvir (100 mg) with weight-based ribavirin ^c	12 weeks	I, A ^d
Genotype 1 or 4 infection only: Daily daclatasvir (60 mg) ^e plus sofosbuvir (400 mg) with low initial dose of ribavirin (600 mg, increase as tolerated)	12 weeks	I, B

^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 genotypes 5 and 6 are in a small number of patients with compensated cirrhosis.


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

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

^e The dose of daclatasvir may need to be increased or decreased when used concomitantly with cytochrome P450 3A/4 inducers and inhibitors, respectively. Please refer to the prescribing information for daclatasvir.

Recommended regimens listed by evidence level and alphabetically for:

Patients With Decompensated Cirrhosis^a Who Have Genotype 1, 4, 5, or 6 Infection and Are Ribavirin Ineligible

RECOMMENDED	DURATION	RATING 
Daily fixed-dose combination of ledipasvir (90 mg)/sofosbuvir (400 mg)	24 weeks	I, A ^b
Daily fixed-dose combination of sofosbuvir (400 mg)/velpatasvir (100 mg)	24 weeks	I, A ^c
Genotype 1 or 4 infection only: Daily daclatasvir (60 mg) ^d plus sofosbuvir (400 mg)	24 weeks	II, 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 genotypes 5 and 6 are in a small number of patients with compensated cirrhosis.

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

^d The dose of daclatasvir may need to be increased or decreased when used concomitantly with cytochrome P450 3A/4 inducers and inhibitors, respectively. Please refer to the prescribing information for daclatasvir.

Recommended regimens listed by evidence level and alphabetically for:

Patients With Decompensated Cirrhosis^a and Genotype 1, 4, 5, or 6 Infection in Whom Prior Sofosbuvir- or NS5A-Based Treatment Failed

RECOMMENDED	DURATION	RATING 
Prior sofosbuvir-based treatment failure 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 ^b
Daily fixed-dose combination of sofosbuvir (400 mg)/velpatasvir (100 mg) with weight-based ribavirin ^c	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 Only available data for genotype 6 are in patients with compensated cirrhosis.


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

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

Decompensated Cirrhosis Genotype 2 or 3 Infection

Recommended Regimens listed by evidence level and alphabetically for:

Patients With Decompensated Cirrhosis^a Who Have Genotype 2 or 3 Infection and Are Ribavirin Eligible


RECOMMENDED	DURATION	RATING 
Daily fixed-dose combination sofosbuvir (400 mg)/velpatasvir (100 mg) with weight-based ribavirin	12 weeks	I, A
Daily daclatasvir (60 mg) ^b plus sofosbuvir (400 mg) with low initial dose of ribavirin (600 mg, increase as tolerated)	12 weeks	II, B

^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 The dose of daclatasvir may need to be increased or decreased when used concomitantly with cytochrome P450 3A/4 inducers and inhibitors, respectively. Please refer to the prescribing information for daclatasvir.

Recommended regimens listed by evidence level and alphabetically for:

Patients With Decompensated Cirrhosis^a Who Have Genotype 2 or 3 Infection and Are Ribavirin Ineligible


RECOMMENDED	DURATION	RATING 
Daily fixed-dose combination of sofosbuvir (400 mg)/velpatasvir (100 mg)	24 weeks	I, A
Daily daclatasvir (60 mg) ^b plus sofosbuvir (400 mg)	24 weeks	II, 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 The dose of daclatasvir may need to be increased or decreased when used concomitantly with cytochrome P450 3A/4 inducers and inhibitors, respectively. Please refer to the prescribing information for daclatasvir.

Recommended regimens listed by evidence level and alphabetically for:

Patients With Decompensated Cirrhosis^a and Genotype 2 or 3 Infection in Whom Prior Sofosbuvir- or NS5A-Based Treatment Failed

RECOMMENDED	DURATION	RATING 
Daily fixed-dose combination of sofosbuvir (400 mg)/velpatasvir (100 mg) with weight-based ribavirin ^b	24 weeks	II, 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 Low initial dose of ribavirin (600 mg) is recommended for patients with CTP class C.

Regimens not recommended for:

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

NOT RECOMMENDED	RATING ⁱ
Paritaprevir-based regimens	III, B
Simeprevir-based regimens	III, B
Elbasvir/grazoprevir-based regimens	III, C
Glecaprevir/pibrentasvir	III, C
Sofosbuvir/velpatasvir/voxilaprevir	III, C

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