High Genotype 2 and 3 Hep C Cure Rates for New AbbVie Combo

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AbbVie's investigational hepatitis C virus (HCV) treatments ABT-493 and ABT-530, with and without ribavirin, posted mostly high cure rates among people with genotypes 2 and 3 of the virus. Researchers in the ongoing Phase II, two-part SURVEYOR-II study are testing eight- and 12-week regimens of the NS3/4A protease inhibitor ABT-493 and the NS5A inhibitor ABT-530, with or without ribavirin, among people who were treatment naive or who had failed interferon-based treatment. The participants include cirrhotic and non-cirrhotic people.

Results about non-cirrhotic participants were presented at the Annual Meeting of the American Association for the Study of Liver Diseases (AASLD) in San Francisco.

The 74 participants with genotype 2, of whom 88 percent were treatment naive, were divided into three arms. All were treated for 12 weeks. Of the 25 participants in Arm A, who received 300 milligrams of ABT-493 and 120 mg of ABT-530, 24 achieved a sustained virologic response 12 weeks after completing therapy (SVR12, considered a cure), for a cure rate of 96 percent. All the 24 participants in Arm B, who received 200 milligrams of ABT-493 and 120 mg of ABT-530, were cured. All the 25 participants in Arm C, who received ribavirin with 200 milligrams of ABT-493 and 120 mg of ABT-530 , were cured as well.

Among the genotype 2 participants, the most commonly reported side effects, occurring in more than 10 percent of participants, were fatigue, nausea, diarrhea and headache. There were no study drug-related serious side effects.

The participants with genotype 3 were divided into four arms, and all were treated for 12 weeks. Of the 30 participants in Arm D, of whom 90 percent were treatment naive and who received 300 mg of ABT-493 and 120 mg of ABT-530, 28 were cured, for a cure rate of 93 percent. Of the 30 participants in Arm E, of whom 93 percent were treatment naive and who received 200 mg of ABT-493 and 120 mg of ABT-530, 28 were cured, for a cure rate of 93 percent. Of the 31 participants in Arm F, of whom 90 percent were treatment naive and who received ribavirin with 200 mg of ABT-493 and 120 mg of ABT-530, 29 were cured, for a cure rate of 94 percent. Of the 30 participants in Arm G, of whom 93 percent were treatment naive and who received 200 mg of ABT-493 and 40 mg of ABT-530, 25 were cured, for a cure rate of 83 percent.

Among the genotype 3 participants, the most commonly reported side effects, occurring in more

than 10 percent of participants, were fatigue, nausea and headache. One participant stopped treatment because of abdominal pain and heat sensation. None experienced study drug-related side effects.

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