Sovaldi-Olysio-Ribavirin Cost-Effective Over Sovaldi-Ribavirin

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Twelve weeks of treatment with Sovaldi (sofosbuvir), Olysio (simeprevir) and ribavirin is more cost effective than 24 weeks of Sovaldi and ribavirin when treating interferon-intolerant people with genotype 1 of hepatitis C virus (HCV).

Publishing their findings in Hepatology, researchers conducted a cost-effective analysis of the respective regimens, both of which are recommended by the American Association for the Study of Liver Diseases (AASLD) and the Infectious Diseases Society of America (IDSA) for treating this demographic. Sovaldi/ribavirin is the AASLD's preferred regimen, although it must be prescribed off-label because it is not specifically approved by the U.S. Food and Drug Administration. Twenty-four weeks of Sofosbuvir and ribavirin costs about $169,000 and has cure rates between 52 percent and 84 percent. Twelve weeks of Sofosbuvir, Olysio and ribavirin costs about $150,000, with cure rates between 89 and 100 percent.

The analysis was based on a cohort of treatment-naive and treatment-experienced 50-year-olds with genotype 1 of hep C, although it excluded those who had failed treatment with Incivek (telaprevir) or Victrelis (boceprevir).

The analysis took into account medication costs, treatment-related care, subsequent treatment attempts after failure to achieve a cure, and the progression of hep C infection after a failed re-treatment.

On average, the Sovaldi, Olysio and ribavirin regimen would yield a cost of $165,336 per person treated considering all the aforementioned variables and would yield 14.69 quality-adjusted life years (QALYs), while Sovaldi and ribavirin would yield a cost of $243,586 and would yield 14.45 QALYs. The former treatment regimen would save $91,590 per cured person when compared with the latter regimen.

To read the study abstract, click here.

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