AbbVie’s Hep C Regimen Mavyret Works Well Among Seniors

A pooled analysis of numerous studies found the safety and efficacy of the regimen was comparable between those under and those over 65.

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AbbVie’s Mavyret (glecaprevir/pibrentasvir) is safe and effective in treating hepatitis C virus (HCV) among those age 65 and older, yielding comparable results to those seen among younger individuals.

Researchers pooled results from 2,369 people with genotypes 1 through 6 of hep C who received Mavyret for 8, 12 or 16 weeks in nine Phase II and III trials, including MAGELLAN-1, SURVEYOR-I and II, ENDURANCE-1, -2, -3 and -4 and EXPEDITION-1 and -4.

Findings were presented at the Annual Meeting of the American Association for the Study of Liver Diseases in Washington, DC.

A total of 328 (14 percent) of the participants were age 65 and older. Those in the senior set and in the younger group had the following respective demographics: male (55 percent of the seniors, 56 percent of the younger group), white (68 percent versus 82 percent), a body-mass index, or BMI, under 30, indicating sub-obese weight (80 percent versus 79 percent), genotype 1 of hep C (42 percent versus 42 percent), genotype 2 (34 percent versus 18 percent), genotype 3 (11 percent versus 30 percent), were first-timers to treatment (60 percent versus 71 percent) and did not have cirrhosis (80 percent versus 88 percent).

A total of 97.9 percent (321 of 328) of the seniors achieved a sustained virologic response 12 weeks after completing therapy (SVR12, considered a cure), compared with 97.3 percent (1,986 of 2,041) of those younger than 65.

Among both those younger than 65 and those over 65, the rate of adverse health events leading individuals to stop treatment was 1.2 percent or less.

Looking at those who did not have severe kidney impairment, among the seniors (300 people total) and those in the younger group (1,965 people), a respective 63 percent and 68 percent experienced any adverse health event, while a respective 4 percent and 2 percent experienced any serious adverse health event. As for those who did have severe kidney impairment, including

28 seniors and 76 of those in the younger category, a respective 79 percent and 68 percent experienced any adverse health event, and a respective 39 percent and 18 percent experienced any serious adverse health event.

Regardless of kidney health and age group, the most common adverse health events were headache, fatigue, nausea, diarrhea and itching.

To read the conference abstract, click here.

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