An Intro to Hepatitis C Treatment

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Hepatitis C treatment has improved dramatically in recent years. The new medications—called direct-acting antivirals because they attack hepatitis C virus (HCV) directly—are taken for two or three months, cause few side effects and have cure rates above 90 percent.

In contrast, the old interferon therapy lasted a year, required weekly injections, often caused harsh side effects and cured only about half of the people who tried it.

The new drugs are so effective that groups of people who did not respond well to the old treatment—including African Americans, people with HIV/HCV coinfection and people with advanced liver disease—can now usually be cured.

There are several direct-acting antiviral medications to choose from, including coformulations that include a complete combination regimen in a single pill. They include:

Daklinza (daclatasvir)

Epclusa (sofosbuvir/velpatasvir)

Harvoni (ledipasvir/sofosbuvir)

Olysio (simeprevir)

Sovaldi (sofosbuvir)

Technivie (ombitasvir/paritaprevir/
ritonavir)

Viekira Pak and Viekira XR (ombitasvir/paritaprevir/ritonavir and dasabuvir)

Zepatier (elbasvir/grazoprevir)

Your doctor will consider various factors when choosing a regimen, including your HCV genotype, viral load, past treatment experience and level of liver damage (fibrosis or cirrhosis). Combinations containing interferon are no longer recommended. People with certain HCV genotypes or advanced liver disease may need to add ribavirin. In some cases, health insurance plans may require using specific drugs.

When hepatitis C treatment is working, the virus will become undetectable in the blood. People are considered cured if they still have an undetectable viral load 12 weeks after completing treatment,

known as a sustained virologic response, or SVR12. Once this is achieved, there is a near-zero risk that the virus will recur—but it is nonetheless possible to become infected again.

With such effective and well-tolerated treatment available, there is little reason to delay treatment until a person develops advanced liver disease. Both the American Association for the Study of Liver Diseases and the Infectious Diseases Society of America recommend treatment for all people with chronic hepatitis C.

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