




Post-Transplantees Achieve Promising Results From Sofosbuvir

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 Preliminary results from a study of sofosbuvir and ribavirin given to people with hepatitis C virus (HCV) who have had a liver transplant suggest the new direct-acting antiviral is a vast improvement upon the currently available therapies, *aidsmap* reports. Michael Charlton, MD, of the Mayo Clinic in Rochester, Minnesota, presented findings of the study of 40 post-transplant people with hep C at the 64th Annual Meeting of the American Association for the Study of Liver Diseases (AASLD) in Washington, DC.

The participants had received their transplants between six and 150 months before the study; all of them had experienced a recurrence of their viral infection in the new organ. After 12 weeks of treatment with sofosbuvir and ribavirin, all 39 participants who provided data for analysis had an undetectable viral load. Thirty-five participants have gone four weeks past the end of therapy, of whom 27, or 77 percent, have maintained an undetectable viral load. Once they reach 12 weeks of such a sustained virologic response (SVR), they will be considered cured.

There was no evidence that sofosbuvir affected anti-transplant rejection immunosuppressant medications. Two participants left the study because of adverse events, although they were not related to the hep C therapies. The study had no deaths, graft losses or organ rejections. More than one in four participants experienced grade 3 or 4 lab abnormalities—typically those linked to ribavirin, such as low lymphocytes or low hemoglobin.

To read the MedPage Today story, [click here](#).

To read the sofosbuvir and ribavirin abstract, [click here](#).

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