



Waiting for Generic Harvoni

July 6, 2015 By [Greg Jefferys](#)

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A little bit on the side: Countries that Definitely Allow the Importation of Medications for Personal Use
As I have mentioned previously I am in the process of building a data base explaining the rules of different countries regarding importation of sofosbuvir for personal use. In all these cases listed below I have obtained direct rulings from the relevant government authority of the particular country. One reason for me doing this is to dispel the large amount of misinformation spread about this subject. Many people who are seeking medication alternatives, particularly generic HCV medication from India, are being given false or inaccurate information about their legal status.

Anyway here is the beginning of this here are the countries that definitely allow importation of medication for personal use.

Allows importation of 3 months supply on person or by courier. Prescription advised: Australia: Singapore: UK: New Zealand: USA: Poland: Venezuela: Lithuania.

Allows importation of 3 months supply on person but not by courier. Prescription needed. Canada: Ireland.

If you live in any country not mentioned here and can send me information about your country's rules, with documentation, I would be most grateful.

For further details, exact documents and links to government websites [please click this link](#) to the page on my website.

Waiting for Generic Harvoni

A lot of people with Hep C genotype 1 have been told to wait for the arrival of the generic version of the new Gilead sofosbuvir combo known as Harvoni. This is more effective than the Sof/Rib combination for genotype 1 a & b.

The generic Harvoni is reported to be coming out in India in late 2015, before Christmas. And we all hope it does, but it might not. From chatter on the Internet it seems that Gilead is working hard on a containment policy to make it difficult for people from countries that are not one of the 91 countries on its so-called access program.

A lot of people with GT1 have been through the hell of the Interferon based treatments and failed and are now tossing up about waiting for the Indian Harvoni or just getting on with the Sof/Rib treatment, which in a best case scenario appears to offer a 69% SVR. Not too bad but not as good as Harvoni's reported 95% SVR.

So the question is to wait or not to wait? For some people the decision is made more pressing by the fact that their livers are getting attacked and their health is rapidly going down hill. Here is an excerpt from an interesting story along these lines I feel would be useful for some people.

The person referred to has genotype 1b

I have a good news to share from a friend today. She has been on generic sofosbuvir plus ribavirin for 2 weeks, and her AST/ALT have dropped significantly from 276/312 to 86/129. Although this is not the best treatment option for her GT1b, her doctor wanted to bring her enzymes down first and add other DAA when it becomes available and affordable to her! So, we have to keep eyes open and get her the second

DAA as soon as it is available.

(DAA stands for Direct Acting Antiviral)

This is a great example and I think she has a VERY sensible, even brilliant, doctor!

Because the consideration that a lot of people have is that they are very sick now, and cannot access Harvoni or any of the other new meds, and they may die or get very, very sick before the new medications arrive. I believe this approach outlined above will “buy them time” by taking the pressure off the liver for a few months, perhaps giving an SVR (at a better than 50% chance) but if not achieving SVR then at least reducing liver damage until generic Harvoni comes out. It is what I would do rather than just waiting and allowing the liver damage to progress. Of course I am not a doctor and everyone has to make their own minds up based on their own situation and the best advice that they can get.

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