

DRUG TREATMENT FOR HEPATITIS C VIRUS INFECTION

Characteristics of Persons for Whom Therapy is Widely Accepted¹:

- Age ≥18 years; Hepatitis C Virus (HCV)-RNA serum positive
- Compensated liver disease (total serum bilirubin <1.5g/dL; INR 1.5; serum albumin >3.4; platelet count 75,000/mm³; and no evidence of hepatic decompensation (hepatic encephalopathy or ascites)
- Acceptable hematological and biochemical indices: Hemoglobin 13g/dL for men and 12g/dL for women; neutrophil count 1500/mm³ and serum creatinine <1.5mg/dL

Dose modifications: This table refers to usual initial dosing of therapy based on manufacturers' prescribing information. For more information regarding dose modification and reductions, see drug monographs at www.eMPR.com or individual PI.

Brand	Generic	Usual Dosage
DUAL THERAPY		
Infergen* + ribavirin**	interferon alfacon-1	Adults: 15mcg SC once daily + ribavirin 1000mg (<75kg) or 1200mg (≥75kg) in 2 divided doses up to 48wks. Children: Not recommended.
Intron A + Rebetol**	interferon alfa-2b + ribavirin	Adults: ≥18yrs: 3million Units SC three times weekly + Rebetol 1000mg (≤75kg) or 1200mg (>75kg) in 2 divided doses for 24–48wks; Retreatment: 24wks. Children: ≥3yrs: 25–61kg: 3million Units/m ² SC three times weekly + 15mg/kg/day Rebetol divided in AM & PM for 48wks (genotype 1) or 24wks (genotype 2,3).
Pegasys* + Copegus**	peginterferon alfa-2a + ribavirin	Adults: ≥18yrs: <i>Genotype 1,4:</i> 180mcg SC once weekly + Copegus 1000mg (<75kg) or 1200mg (≥75kg) in 2 divided doses up to 48wks. <i>Genotype 2,3:</i> 180mcg SC once weekly + 800mg Copegus for 24wks in 2 divided doses. Children: ≥5yrs: 180mcg/1.73m ² /wk SC + 15mg/kg/day Copegus divided in AM & PM for 48wks (genotype 1) or 24wks (genotype 2,3); <i>see literature.</i>
PegIntron* + Rebetol**	peginterferon alfa-2b + ribavirin	Adults: ≥18yrs: 1.5mcg/kg/wk SC + Rebetol 800mg (≤65kg) or 1000mg (>65–80kg) or 1200mg (>80kg) or 1400mg (>105kg) for 48wks (genotype 1) or 24wks (genotype 2,3). Retreatment: 48wks. Prior treatment failure: Add HCV NS3/4A Protease Inhibitor (unless contraindicated); treat for 48wks. Children: 3–17yrs: 60mcg/m ² /wk SC + 15mg/kg/day Rebetol in 2 divided doses for 48wks (genotype 1) or 24wks (genotype 2, 3).
TRIPLE THERAPY		
Incevik† + peginterferon alfa & ribavirin	telaprevir	Adults: 750mg three time daily with non low fat food for 12wks with peginterferon alfa + ribavirin. Then continue peginterferon + ribavirin according to HCV-RNA response at Weeks 4 and 12 (<i>see literature</i>). Children: Not recommended.
Victrelis† + peginterferon alfa & ribavirin	boceprevir	Adults: Initiate peginterferon alfa + ribavirin for 4wks. Then add 800mg Victrelis three times daily to therapy. <i>Patients without cirrhosis:</i> continue treatment as indicated by HCV-RNA levels at Weeks 8, 12, and 24 (<i>see literature</i>). <i>With cirrhosis:</i> continue for 44wks. Children: Not recommended.
MONOTHERAPY		
Infergen*†	interferon alfacon-1	Adults: 9mcg SC three times weekly for 24wks. Retreatment if tolerated: 15mcg SC three times weekly for up to 48wks. Children: Not recommended.
Intron A	interferon alfa-2b	Adults: 3million Units SC or IM three times weekly for 16wks; if tolerated with normalization of ALT: continue 18–24 months (72–96wks). Children: Monotherapy not recommended.
Pegasys*†	peginterferon alfa-2a	Adults: 180mcg SC once weekly for 48wks. Children: Not recommended.
PegIntron*†	peginterferon alfa-2b	Adults: 1mcg/kg/wk SC for 1 year administered on same day of the week. Children: Not recommended.
NOTES		
¹ Ghany MG, Strader DB, Thomas DL, Seeff LB. Diagnosis, Management, and Treatment of Hepatitis C: An Update. <i>Hepatology</i> . 2009; 49(4). *Patients who fail to achieve a 2 log ₁₀ drop at 12 weeks or undetectable HCV-RNA at Week 24 are highly unlikely to achieve SVR and discontinuation of therapy should be considered. **Ribavirin should be taken orally with food. Do not use with creatinine clearance <50mL/min. Take in 2 divided doses (AM & PM); <i>see literature.</i> †Indicated for the treatment of chronic hepatitis C genotype 1 infection for combination therapy only. ‡Drug is not recommended as monotherapy unless patient cannot take ribavirin as combination treatment. IM = intramuscularly; mcg = microgram; SC = subcutaneously; SVR = sustained virologic response; wks = weeks		

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