## Hepatitis C Virus Treatment Guidelines (Part 1 of 2)

### Genotype 1A

**Recommended**
- Zepatier for 12wks OR
- Mavyret for 8wks OR
- Harvoni for 12wks OR
- Epclusa for 12wks

**Without Cirrhosis**
- Zepatier for 12wks OR
- Mavyret for 12wks OR
- Harvoni for 12wks OR
- Epclusa for 12wks

**With Compensated Cirrhosis**
- Zepatier for 12wks OR
- Mavyret for 8wks OR
- Harvoni for 12wks OR
- Epclusa for 12wks

**Alternative**
- Viekira Pak + ribavirin for 12wks OR
- Olysio + Sovaldi for 12wks OR
- Daklinza + Sovaldi for 12wks OR
- Zepatier + ribavirin for 16wks

**Genotype 1B**

**Recommended**
- Zepatier for 12wks OR
- Mavyret for 8wks OR
- Harvoni for 12wks OR
- Epclusa for 12wks

**Without Cirrhosis**
- Zepatier for 12wks OR
- Mavyret for 12wks OR
- Harvoni for 12wks OR
- Epclusa for 12wks

**With Compensated Cirrhosis**
- Zepatier for 12wks OR
- Mavyret for 12wks OR
- Harvoni for 12wks OR
- Epclusa for 12wks

**Alternative**
- Viekira Pak for 12wks OR
- Olysio + Sovaldi for 12wks OR
- Daklinza + Sovaldi for 12wks OR
- Zepatier + ribavirin for 16wks

**Genotype 2**

**Recommended**
- Mavyret for 8wks OR
- Epclusa for 12wks

**Without Cirrhosis**
- Mavyret for 8wks OR
- Epclusa for 12wks

**With Compensated Cirrhosis**
- Mavyret for 8wks OR
- Epclusa for 12wks

**Alternative**
- Daklinza + Sovaldi for 12wks

**Daklinza + Sovaldi for 16–24wks**

**Genotype 3**

**Recommended**
- Mavyret for 8wks OR
- Epclusa for 12wks

**Without Cirrhosis**
- Mavyret for 8wks OR
- Epclusa for 12wks

**With Compensated Cirrhosis**
- Mavyret for 12wks OR
- Vosevi for 12wks

**Alternative**
- Daklinza + Sovaldi for 12wks
- Daklinza + Sovaldi +/− ribavirin for 24wks

**Daklinza + Sovaldi for 16–24wks**

**Genotype 4**

**Recommended**
- Mavyret for 8wks OR
- Epclusa for 12wks OR
- Zepatier for 12wks OR
- Harvoni for 12wks

**Without Cirrhosis**
- Mavyret for 8wks OR
- Zepatier for 12wks OR
- Harvoni for 12wks OR

**With Compensated Cirrhosis**
- Zepatier for 12wks OR
- Harvoni for 12wks OR

**Alternative**
- Daklinza + Sovaldi for 12wks
- Vosevi for 12wks

**Daklinza + Sovaldi +/− ribavirin for 24wks**

**Daklinza + Sovaldi for 16–24wks**

**Vosevi for 12wks**

### (continued)
### GENOTYPE 4 (continued)

#### Alternative
- Technivie + ribavirin for 12wks
- Technivie* + ribavirin for 12wks

#### Recommended
- Mavyret for 12wks OR
- Epclusa for 12wks OR
- Harvoni for 12wks

### GENOTYPE 5, 6

#### Recommended
- Mavyret for 8wks OR
- Epclusa for 12wks OR
- Harvoni for 12wks OR

### PHARMACOLOGICAL THERAPIES

<table>
<thead>
<tr>
<th>Generic</th>
<th>Brand</th>
<th>Strength</th>
<th>Form</th>
<th>Dosage</th>
</tr>
</thead>
<tbody>
<tr>
<td>daclatasvir</td>
<td>Daklinza</td>
<td>30mg, 60mg, 90mg</td>
<td>tabs</td>
<td>60mg once daily. Concomitant strong CYP3A inhibitors(^{10}), PIs, cobicistat-containing regimens (except with darunavir): 30mg once daily. Concomitant moderate CYP3A inducers: (^{11}) 90mg once daily</td>
</tr>
<tr>
<td>elbasvir/grazoprevir</td>
<td>Zepatier</td>
<td>50mg/100mg</td>
<td>tabs</td>
<td>1 tab once daily</td>
</tr>
<tr>
<td>glecaprevir/ pibrentasvir</td>
<td>Mavyret</td>
<td>100mg/40mg</td>
<td>3 tabs once daily with food</td>
<td></td>
</tr>
<tr>
<td>ledipasvir/sofosbuvir</td>
<td>Harvoni</td>
<td>90mg/400mg</td>
<td>tabs</td>
<td>1 tab once daily</td>
</tr>
<tr>
<td>ombitasvir/paritaprevir/ ritonavir</td>
<td>Technivie</td>
<td>12.5mg/75mg/50mg</td>
<td>tabs</td>
<td>2 tabs once daily in AM with a meal</td>
</tr>
<tr>
<td>ombitasvir/paritaprevir/ ritonavir and dasabuvir</td>
<td>Viekira Pak</td>
<td>12.5mg/75mg/50mg and 250mg</td>
<td>tabs</td>
<td>Take with a meal. 2 tabs ombitasvir/paritaprevir/ritonavir once daily (in AM) and 1 tab dasabuvir twice daily (AM &amp; PM)</td>
</tr>
<tr>
<td>ribavirin</td>
<td>Copegus</td>
<td>200mg</td>
<td>tabs</td>
<td>Take with food. Weight-based dosing (&lt;75kg: 1000mg/day; ≥75kg: 1200mg/day in 2 divided doses). See full labeling.</td>
</tr>
<tr>
<td>simeprevir</td>
<td>Olysio</td>
<td>150mg</td>
<td>caps</td>
<td>1 cap once daily with food</td>
</tr>
<tr>
<td>sofosbuvir</td>
<td>Sovaldi</td>
<td>400mg</td>
<td>tabs</td>
<td>1 tab once daily</td>
</tr>
<tr>
<td>sofosbuvir/velpatasvir</td>
<td>Epclusa</td>
<td>400mg/100mg</td>
<td>tabs</td>
<td>1 tab once daily</td>
</tr>
<tr>
<td>sofosbuvir/velpatasvir/ voxilaprevir</td>
<td>Vosevi</td>
<td>400mg/100mg/100mg</td>
<td>tabs</td>
<td>1 tab once daily with food</td>
</tr>
</tbody>
</table>

#### NOTES

- For recommended and alternative regimens for specific patient populations (eg, treatment-experienced patients previously treated with regimens other than PEG-IFN/ribavirin, compensated cirrhosis, HIV/HCV co-infection, renal impairment, etc), refer to the full guideline or drug manufacturer’s labeling.
- Patients with no baseline NS5A RASs for elbasvir detected. Includes G1a substitutions at amino acid positions 28, 30, 31, or 93 known to confer antiviral resistance.
- An 8-week duration is recommended for treatment-naive patients without cirrhosis who are non-black, HIV uninfected, and whose HCV RNA level is <6 million IU/ml.
- Patients who have baseline NS5A RASs for elbasvir. Includes G1a substitutions at amino acid positions 28, 30, 31, or 93 known to confer antiviral resistance.
- Reference FDA warning regarding use of ombitasvir/paritaprevir/ritonavir +/− dasabuvir in patients with cirrhosis (risk of hepatic decompensation/hepatic failure).
- Patients in whom no Q80K substitution is detected.
- Alternative only for patients who are negative for the Q80K substitution by commercially available resistance assay. Other recommended or alternative regimens should be used for patients with genotype 1a compensated cirrhosis in whom the Q80K substitution is present.
- Baseline RAS testing for Y93H is recommended. Ribavirin should be included in regimen or consider Vosevi if present.
- 12 weeks is recommended for patients who experience virologic relapse after PEG-IFN/ribavirin therapy. Patients with prior on-treatment virologic failure (failure to suppress or breakthrough) while on PEG-IFN/ribavirin should be treated with 16 weeks and have weight-based ribavirin added.
- For patients ineligible for ribavirin.

#### REFERENCES