

Efficacy and Safety of Glecaprevir and Pibrentasvir in Saudi Patients with Chronic Hepatitis C Virus Infection at a Major Tertiary Hospital

Ali A. Ruwayni

Department of Pharmaceutical Care, Armed Forces Hospital, Jazan, Kingdom of Saudi Arabia

Department of Pharmaceutical Care, Prince Sultan Military Medical City, Riyadh, Kingdom of Saudi Arabia

Eman E. AlObari

Department of Pharmaceutical Care, Prince Sultan Military Medical City, Riyadh, Kingdom of Saudi Arabia

Khalid M. Alyahya

Department of Pharmaceutical Care, Prince Sultan Military Medical City, Riyadh, Kingdom of Saudi Arabia

Abstract:

Objectives: To evaluate the effectiveness and safety of glecaprevir/pibrentasvir (GLE/PIB) in chronic hepatitis C (HCV) patients, and to assess the prescribers' adherence to Food and Drug Administration recommendations on treatment duration.

Methods: A retrospective cohort study was carried out on chronic HCV patients of ≥ 18 years, with or without cirrhosis, naive or experienced, and with normal kidney function or chronic kidney disease (including dialysis patients) at Prince Sultan Military Medical City in Riyadh, Saudi Arabia, between February 2020 and March 2021. The primary effectiveness end-point was the number and percentage of patients who achieved a sustained virologic response (SVR12), virologic failure, and non-response. Safety was determined considering both serious and non-serious adverse events.

Results: A total of 92 patients were enrolled in this study. Among patients, 52 (56.5%) were female, 84 (91.3%) were naive, and 45 (48.9 %) had HCV genotype 4. The SVR12 was achieved in 91 (98.9%, 95% CI: [94-99.8]) patients. Only one patient (1.1%, 95% CI: [0.2-5.9]) developed virologic non-response and there were missing data on virologic failure. Overall, non-serious adverse events were observed in 26 (28.5%) patients, and none of them had serious adverse events that led to treatment discontinuation. Approximately 75% of the patients received an inappropriate treatment duration (12 weeks vs. the recommended 8 weeks) and most ($n=40$, 58%; $p<0.022$) of the exceedingly long treatments were prescribed by registrars.

Conclusion: The GLE/PIB was highly effective and safe in chronic HCV Saudi patients.

Keywords:

Hepatitis C virus, direct-acting antiviral agent, chronic kidney disease, glecaprevir, pibrentasvir, Saudi Arabia.