

Treatment Naïve, Chronic HCV and HIV

PEG alfa-2a + RBV *versus* PEG alfa-2a *versus* INF + RBV
APRICOT STUDY

Torriani FJ, et. al. N Engl J Med. 2004;351:438-50.

PEG + RBV *versus* PEG *versus* INF + RBV in HCV & HIV

APRICOT Study: Features

- **Study**

- Randomized, placebo-controlled trial
- Conducted at 95 centers in 19 countries in U.S., Canada, & Europe

- **Subjects**

- N = 868 chronically infected with both HCV and HIV
- Treatment naïve; 61% genotype 1
- CD4 >200 cells/mm³ or
CD4 = 100-200 cells/mm³ + HIV RNA level <5,000 copies/ml

- **Regimens (48 Week Treatment)**

- Peginterferon alfa-2a 180 µg 1x/week + Ribavirin 800 mg/day
- Peginterferon alfa-2a 180 µg 1x/week + Placebo
- Interferon alfa-2a: 3 million IU 3x/week + Ribavirin 800 mg/day

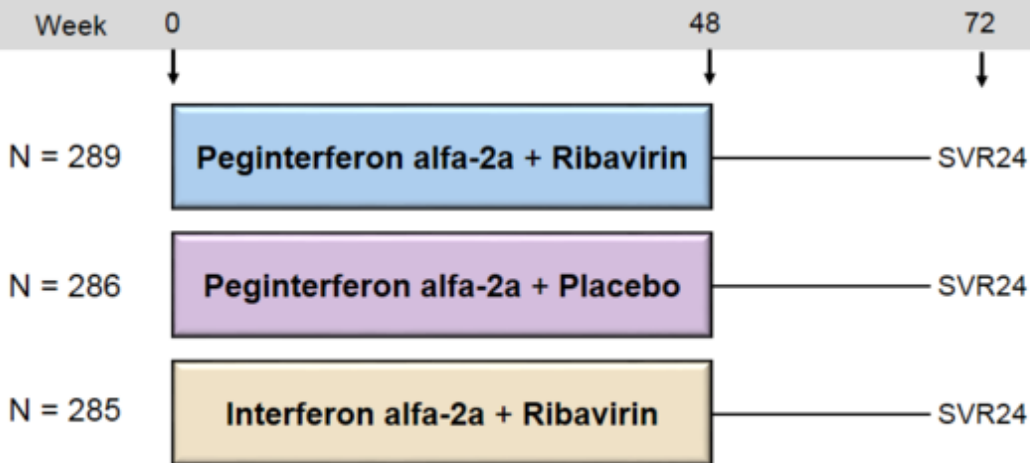
- **Primary Endpoint**

- Undetectable HCV RNA (< 50 IU/ml) 24 weeks after stopping Rx



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APRICOT Study: Design



Drug Dosing

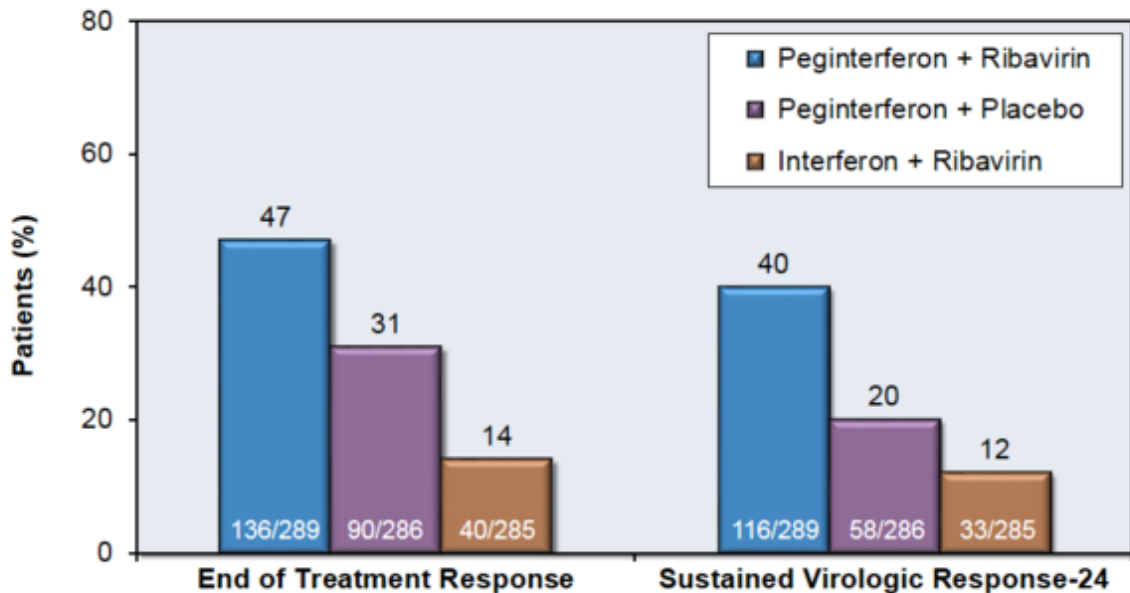
Peginterferon alfa-2a 180 µg 1x/week

Ribavirin (divided bid): 800 mg/day

Interferon alfa-2a 3 million IU 3x/week

PEG + RBV *versus* PEG *versus* INF + RBV in HCV & HIV APRICOT Study: Results

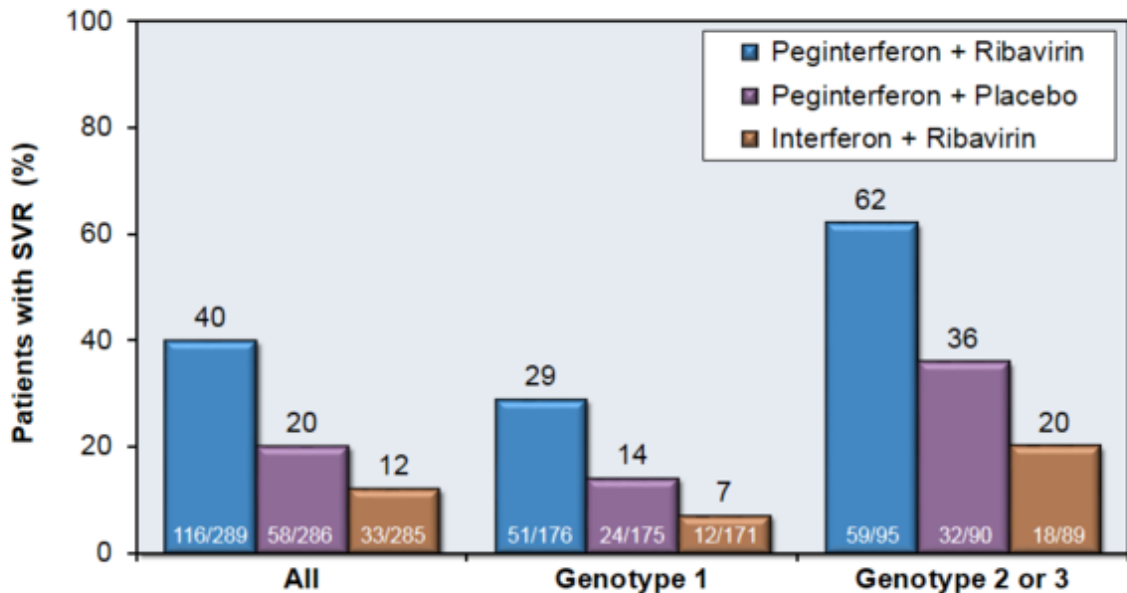
APRICOT Study: Virologic Responses by Treatment Regimen



PEG + RBV *versus* PEG *versus* INF + RBV in HCV & HIV

APRICOT Study: Results

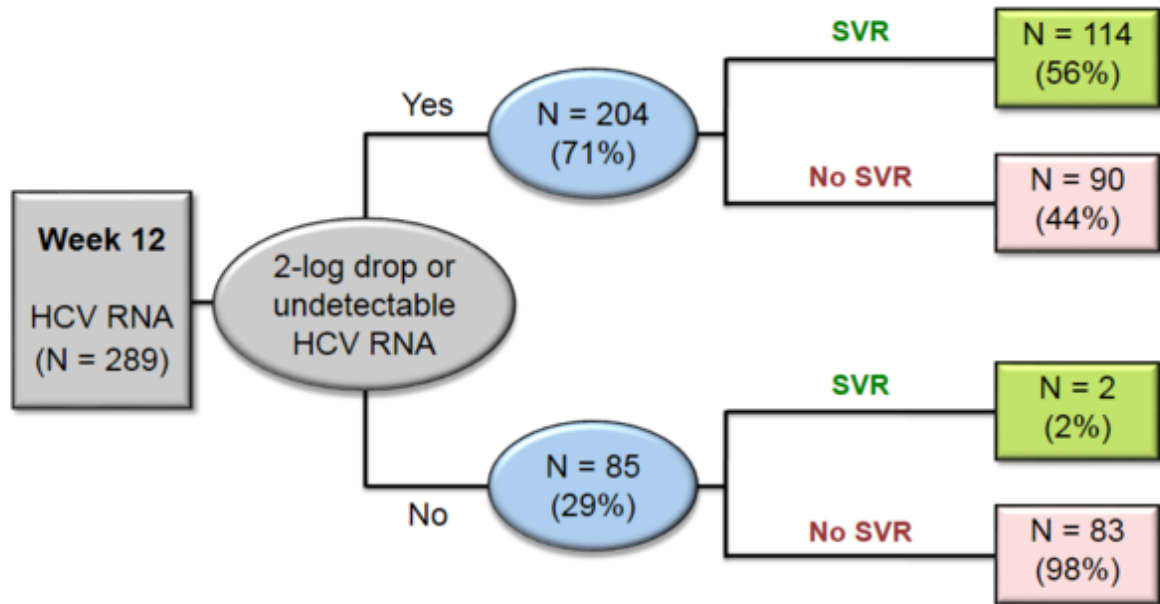
APRICOT Study: SVR24 by Treatment Regimen and Genotype



PEG + RBV *versus* PEG *versus* INF + RBV in HCV & HIV

APRICOT: Predictive Value of Early Virologic Response

Peginterferon alfa-2a + Ribavirin



PEG + RBV *versus* PEG *versus* INF + RBV in HCV & HIV APRICOT Study: Conclusions

Conclusions: “Among patients infected with both HIV and HCV, the combination of peginterferon alfa-2a plus ribavirin was significantly more effective than either interferon alfa-2a plus ribavirin or peginterferon alfa-2a monotherapy.”

This slide deck is from the University of Washington's *Hepatitis C Online* and *Hepatitis Web Study* projects.

Hepatitis C Online
www.hepatitisc.uw.edu

Hepatitis Web Study
<http://depts.washington.edu/hepstudy/>

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