

Hepatitis C [2016]: Bulletin #3

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Abstracts

This edition presents key opinion leader (KOL) views on recent developments in the hepatitis C virus (HCV) infection market. Topics covered include: Medivir AB communicating an update on the results of its triple combination JNJ-4178 (simeprevir/odasvir/AL-335) in an ongoing Phase II study; AbbVie announcing positive data from two Phase III studies, ENDURANCE-3 and EXPEDITION-1, with its pan-genotypic regimen of glecaprevir/pibrentasvir (G/P). Merck & Co. announcing positive results from the Phase II C-SURGE study in which MK-3682B, its triple-combination of uprifosbuvir, grazoprevir and rusazvir, which is being investigated in treatment-experienced GT1 patients for whom treatment with approved direct-acting antiviral (DAA) regimens has previously failed.

Business Questions

Are KOLs impressed by JNJ-4178's efficacy in treatment-naïve, GT1, non-cirrhotic HCV patients?

Will JNJ-4178's 6-week treatment duration provide it with a competitive edge over competing 8-week HCV regimens?

Do KOLs think that JNJ-4178 will prove to be effective in other HCV genotypes?

Could the increasing availability of pan-genotypic HCV therapies limit JNJ-4178's success?

How do KOLs view G/P's pan-genotypic performance in the EXPEDITION-1 and ENDURANCE-3 studies?

Do KOLs expect G/P to satisfy any unmet therapeutic needs within the HCV

market, such as for GT3 infected or renally-insufficient patients?

What role will pricing and marketing play in terms of helping G/P to establish a position within the HCV treatment paradigm?

How do KOLs rate MK-3682B's response rates for treatment-experienced GT1 patients in the Phase II C-SURGE study?

Is MK-3682B destined to become a salvage therapy for DAA-experienced HCV patients?

How large is the patient pool for MK-3682B likely to be given the high success rates achieved by DAA regimens for treating HCV?

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