

Phase 2b Study of the Interferon-Free and Ribavirin-Free Combination of Daclatasvir, Asunaprevir, and BMS-791325 for 12 Weeks in Treatment-Naive Patients With Chronic HCV Genotype 1 Infection

Everson GT, Sims KD, Thuluvath PJ, Lawitz E, Hassanein T, Rodriguez-Torres M, Hawkins T, Schwartz H, Rustgi V, Hiney M, Hinestrosa F, Levin JM, Younossi Z, Webster L, Eley T, Huang S-P, McPhee F, Grasela DM, Gardiner DF

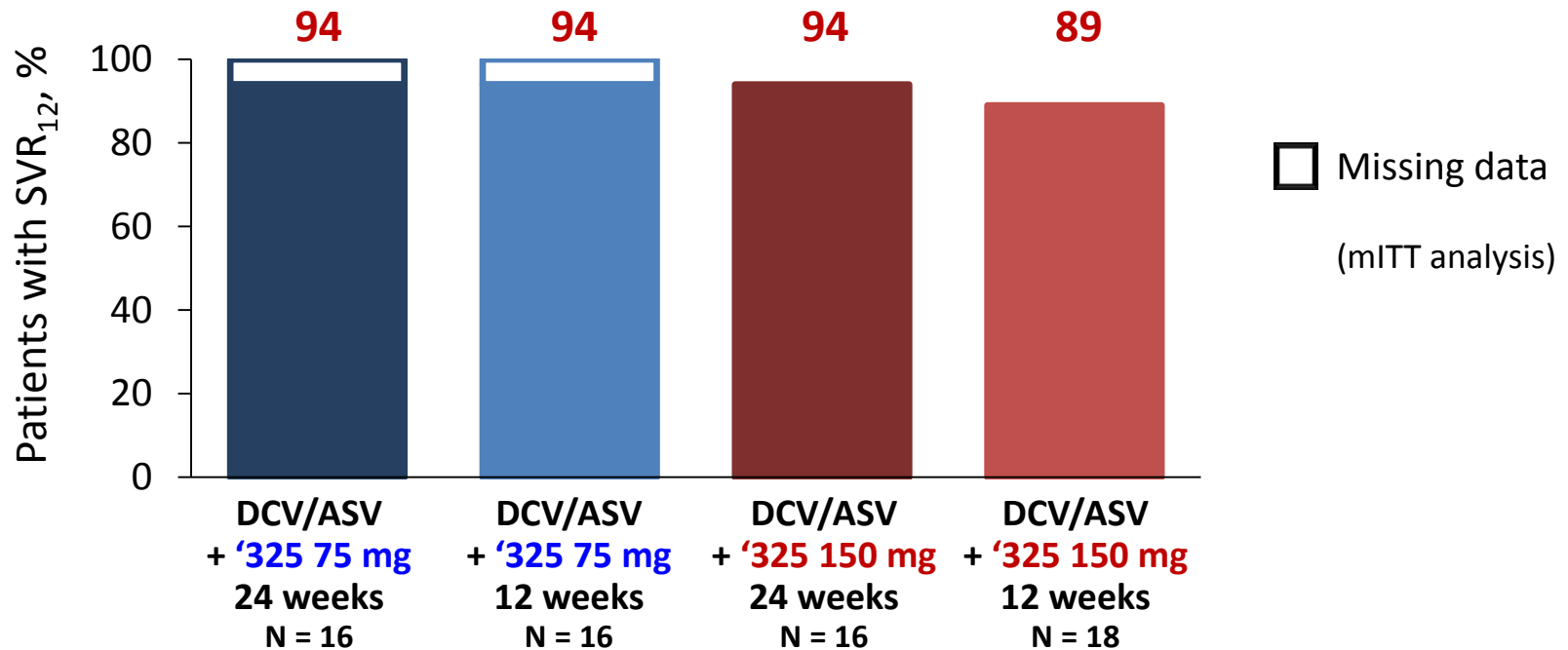
**The Liver Meeting® 2013:
The 64th Annual Meeting of the AASLD
Washington, DC, November 1–5, 2013
Presentation LB-1**

BMS Direct-Acting Antiviral Agents

- Daclatasvir (DCV)
 - NS5A replication complex inhibitor with potent, pan-genotypic activity *in vitro*¹
 - Once-daily dosing, 60 mg tablet with no food restrictions
 - Studied in over 5500 patients in phase 1–3 studies² including all-oral, IFN alfa-free and ribavirin-free combinations
- Asunaprevir (ASV)
 - NS3 protease inhibitor active against genotypes (GT) 1, 4, 5, and 6 *in vitro*³
 - Twice-daily dosing, 200 mg tablet or 100 mg softgel capsule
 - Studied in over 2000 patients in phase 1–3 studies including all-oral combinations
- BMS-791325
 - Non-nucleoside, NS5B polymerase inhibitor active against GT 1, 3, 4, 5, and 6 *in vitro*⁴
 - Twice-daily dosing, either 75 or 150 mg tablet, with no food restrictions
 - Studied in over 500 patients in phase 1–2 studies including all-oral combinations

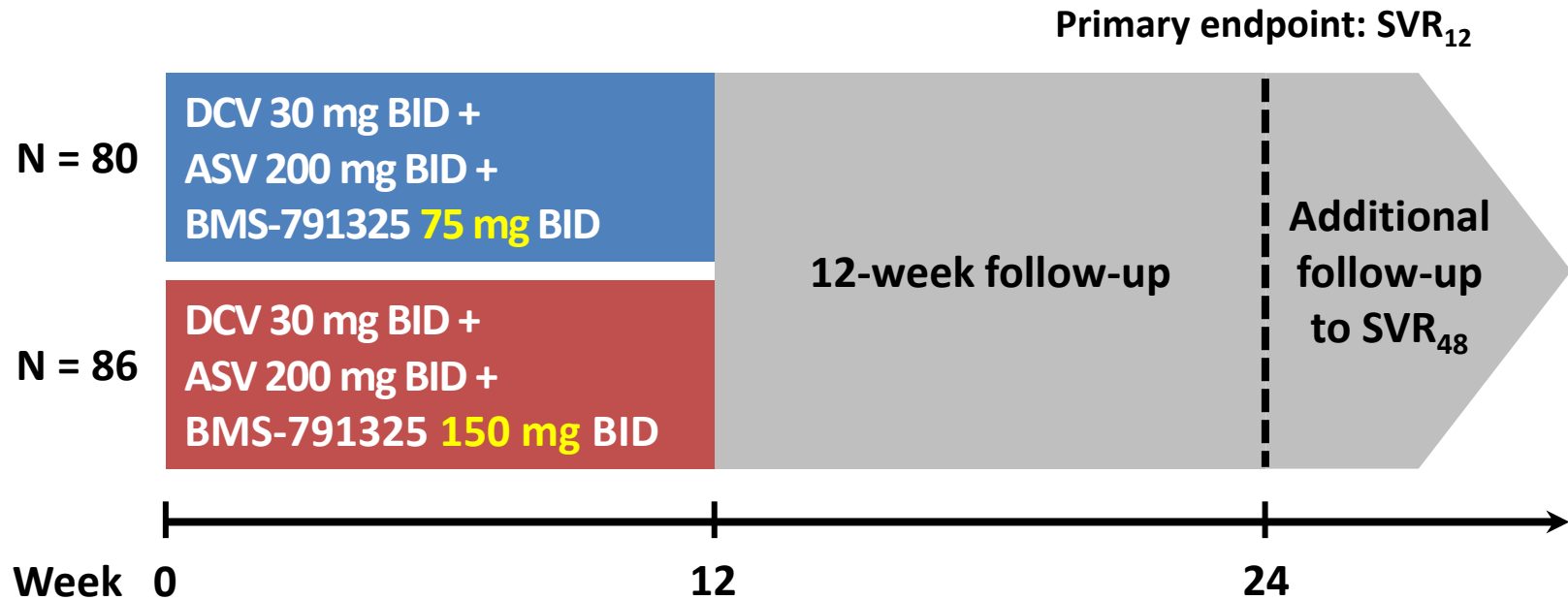
Background

- In pilot cohorts, the all-oral, interferon-free and ribavirin-free combination of DCV, ASV, and BMS-791325 achieved comparable SVR rates after 12 or 24 weeks of therapy in patients with HCV GT 1 infection



- The present study expansion examines 12 weeks of therapy with this regimen in larger cohorts of patients with GT 1 infection, including cirrhotics
 - DCV dosed at 30 mg BID to support co-formulation development based on similar HCV GT 1 viral load reductions with 30 mg BID and 60 mg QD dosing¹

Randomized, Phase 2b Open-Label Study (AI443-014)

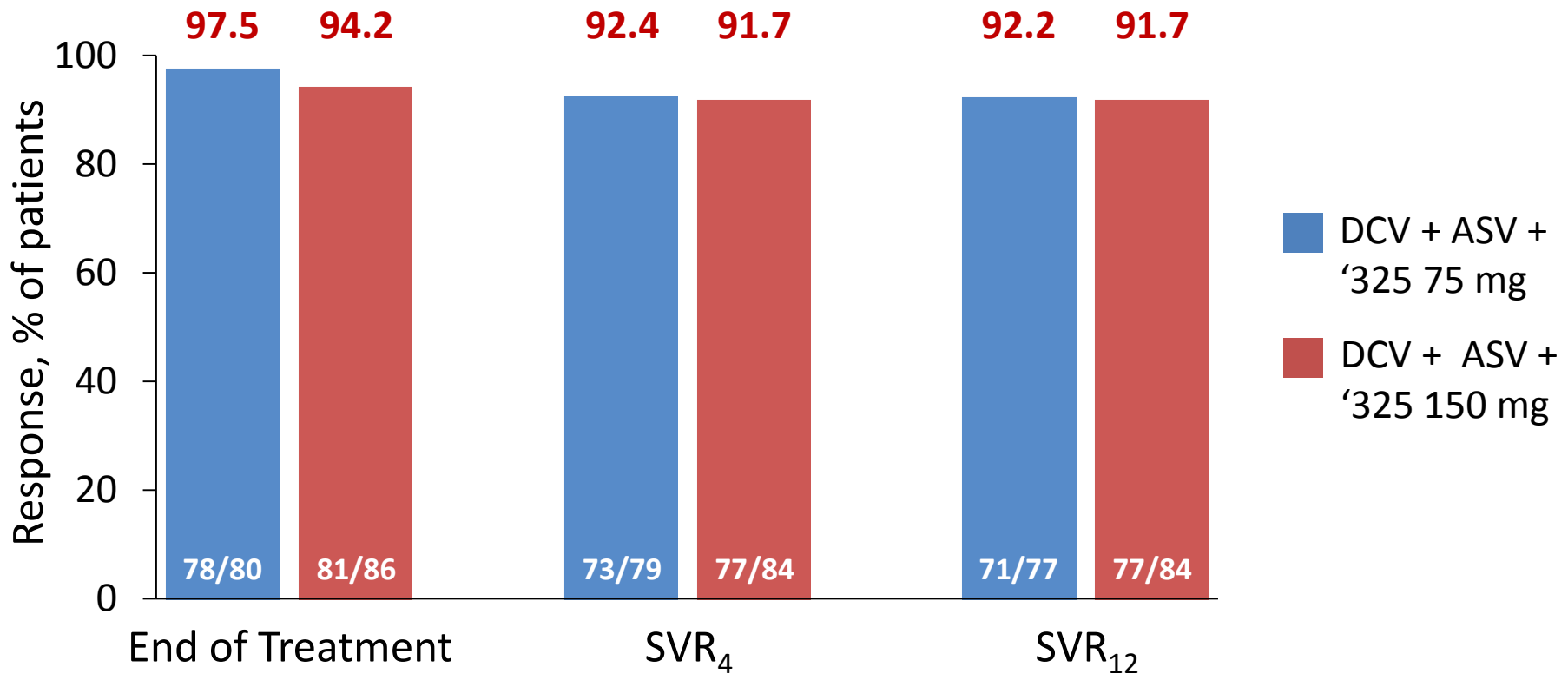


- **Patients:** treatment-naïve, stratified by GT 1a/1b and presence of biopsy-confirmed cirrhosis (≈ 10% cirrhotics per group)
- **HCV RNA end points:** lower limit of assay quantitation, target detected (LLOQ_{TD}; 25 IU/mL), and below LLOQ and target not detected (LLOQ_{TND}; ≈ 10 IU/mL)
- **Primary end point:** HCV RNA < LLOQ 12 weeks post-treatment (SVR₁₂)
 - Observed analysis: breakthrough, relapse, addition of pegIFNα/RBV = failure
 - Modified intent-to-treat analysis: missing, breakthrough, relapse or addition of pegIFNα/RBV = failure

Demographic and Baseline Disease Characteristics

Parameter	DCV + ASV + '325 75 mg N = 80	DCV + ASV + '325 150 mg N = 86	Total N = 166
Age, median years (range)	54 (23-68)	54 (23-69)	54 (23-69)
Male sex, n (%)	55 (69)	57 (66)	112 (67)
Race, n (%)			
White	61 (76)	76 (88)	137 (83)
Black/African American	17 (21)	10 (12)	27 (16)
Other	2 (3)	0	2 (1)
HCV genotype, n (%)			
1a	67 (84)	69 (80)	136 (82)
1b	13 (16)	17 (20)	30 (18)
HCV RNA, mean log ₁₀ IU/mL (SD)	6.3 (0.80)	6.4 (0.69)	
<i>IL28B</i> genotype, n (%)			
CC	25 (31)	29 (34)	54 (33)
CT	44 (55)	39 (45)	83 (50)
TT	9 (11)	17 (20)	26 (16)
Not reported	2 (3)	1 (1)	3 (2)
Cirrhosis (biopsy-confirmed), n (%)	8 (10)	7 (8)	15 (9)
Derived Metavir, n (%)			
F0	23 (29)	20 (23)	43 (26)
F1	17 (21)	17 (20)	34 (20)
F2	10 (13)	12 (14)	22 (13)
F3	12 (15)	22 (26)	34 (20)
F4	16 (20)	14 (16)	30 (18)
Not reported	2 (2)	1 (1)	3 (2)
Metavir categorization was converted from FibroTest score			

Efficacy Through SVR₁₂ (Observed)



Missing Data at Posttreatment Week 12

DCV + ASV + '325 75 mg	DCV + ASV + '325 150 mg
3 patients, mITT SVR ₁₂ = 88.8%	2 patients, mITT SVR ₁₂ = 89.5%

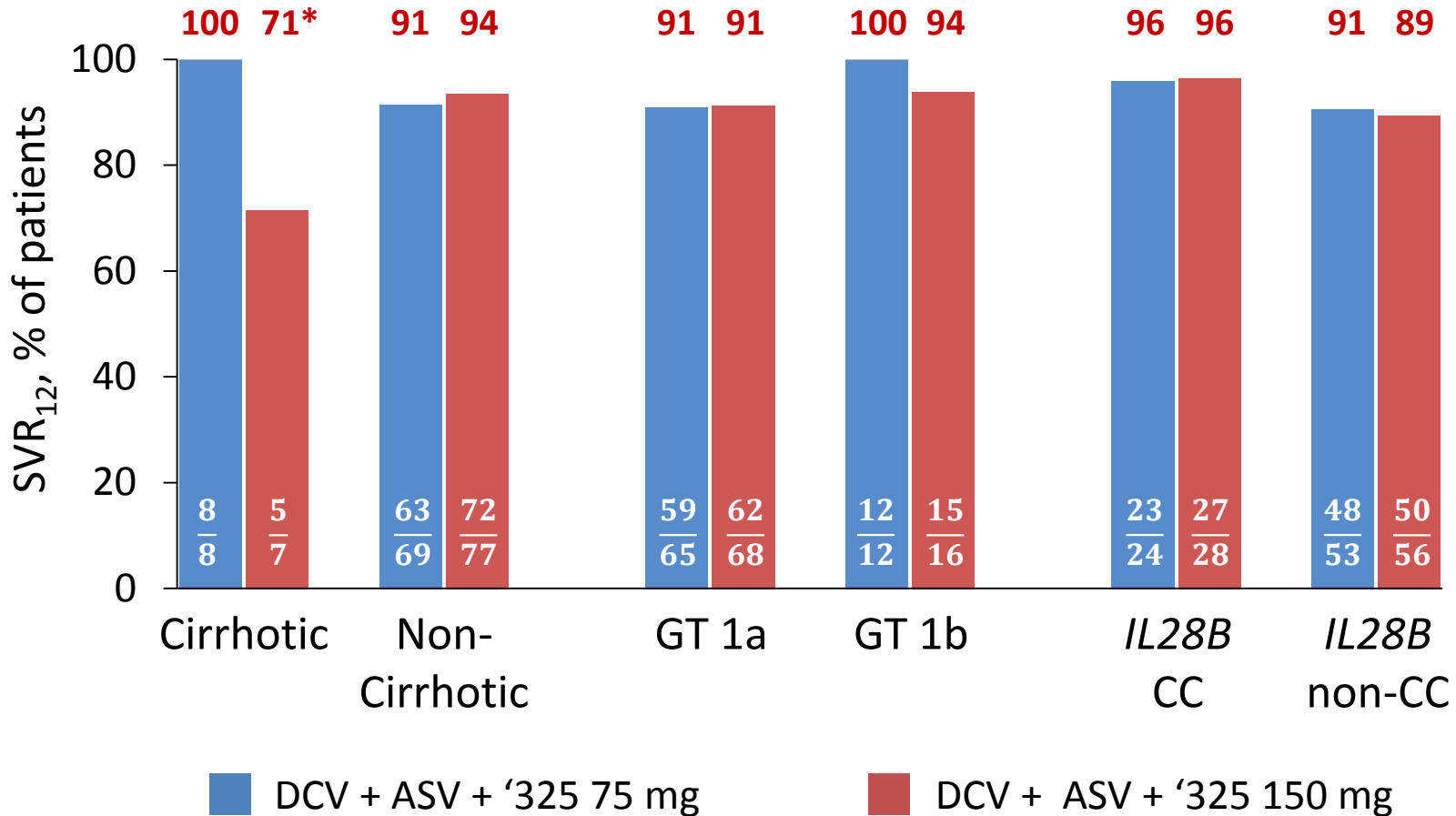
Patients Without SVR₁₂

Failure Category	DCV + ASV + '325 75 mg N = 80	DCV + ASV + '325 150 mg N = 86
Virologic failure	6	5
<i>Viral breakthrough</i>	2	3
<i>Relapse prior to post-treatment Week 4</i>	4	2
<i>Relapse after post-treatment Week 4</i>	0	0
Other ^a	0	2

^a 1 patient discontinued due to AE, 1 patient discontinued '325 only and added pegIFN α /RBV for 12 weeks

- Virologic failures all GT 1a, no other predictive characteristics identified
- 17 patients had NS3 or NS5A signature resistance-associated variants (RAVs) at baseline; 13/17 achieved SVR
- Signature RAVs detected at failure included:
 - NS3: V36M, T54S, and R155K
 - NS5A: M28T, Q30E/H/R, L31M, and Y93H/N
 - NS5B: P495L/S

Efficacy in Subgroups (Observed SVR₁₂)



*2 cirrhotic patients added pegIFN α /RBV: 1 viral breakthrough; 1 met a protocol stopping rule for '325

Reasons for Treatment Discontinuation

n (%)	DCV + ASV + '325 75 mg N = 80	DCV + ASV + '325 150 mg N = 86	Total N = 166
Total discontinuations	2 (2.5)	6 (7.0)	8 (4.8)
<i>Adverse event</i>	1 (1.3)	1 (1.2)	2 (1.2)
<i>Lack of efficacy</i>	0 ^a	3 (3.5)	3 (1.8)
<i>Poor/non-compliance</i>	0	1 (1.2)	1 (0.6)
<i>Other</i>	1 (1.3)	1 (1.2)	2 (1.2)

^a 2 patients had breakthrough confirmed on or after EOT visit

- *Adverse events*: Grade 2 SAE of esophageal tumor on Day 71 ('325 75 mg group, unrelated) and Grade 2 AE of throat tightness on Day 3 ('325 150 mg group, related)
- *Lack of efficacy*: 3 patients with virologic breakthrough; 2 added treatment intensification with pegIFN α /RBV to DCV/ASV/'325 regimen
- *Poor/non-compliance*: Protocol noncompliance after a Grade 2 SAE of abdominal wall abscess on Day 54 (unrelated)
- *Other*: One patient in each group was incarcerated

Safety Outcomes

Event, n (%)	DCV + ASV + '325 75 mg N = 80	DCV + ASV + '325 150 mg N = 86	Total N = 166
Serious AEs ^a	1 (1.3)	2 (2.3)	3 (1.6)
AEs leading to discontinuation ^b	1 (1.3)	1 (1.2)	2 (1.1)
Grade 3/4 AEs ^a	0	1 (1.2)	1 (0.5)
Most frequent on-treatment AEs (≥ 10%)			
Headache	17 (21.3)	24 (27.9)	41 (24.7)
Diarrhea	12 (15.0)	13 (15.1)	25 (15.1)
Fatigue	12 (15.0)	7 (8.1)	19 (11.4)
Nausea	10 (12.5)	7 (8.1)	17 (10.2)
Grade 3/4 lab abnormalities			
Aspartate aminotransferase (AST) ^c	1 (1.3)	0	1 (0.5)
Glucose, fasting serum (high) ^d	1 (1.3)	1 (1.2)	2 (1.2)
Phosphorus, inorganic	0	1 (1.2)	1 (0.5)
Bilirubin, total ^e	0	1 (1.2)	1 (0.5)

^a SAEs and Grade 3/4 AEs included esophageal neoplasm; abdominal wall abscess; pleurisy/chest pain (reported as both SAEs and grade 3 AEs); all unrelated to study drugs

^b Esophageal neoplasm; throat tightness

^c Grade 3 AST elevation on Day 24, normalized by Day 50 on treatment; concurrent bilirubin normal, not considered an AE

^d Both patients had history of diabetes mellitus

^e Baseline Grade 2 elevation to Grade 3 on Day 7 in cirrhotic patient with ALT/AST improving; not considered an AE

Conclusions

- This 12-week, IFN- and RBV-free, all-oral 3 DAA regimen achieved SVR₁₂ in > 90% of patients despite high prevalence of GT 1a, advanced fibrosis/cirrhosis, and *IL28B* non-CC genotypes
- Virologic failures were infrequent
- Well tolerated regimen with low rates of adverse events and treatment discontinuations, regardless of BMS-791325 dose
- These results support phase 3 trials with a twice-daily fixed-dose combination of DCV/ASV/BMS-791325 at the 75 mg dose level¹

¹<http://www.clinicaltrials.gov/ct2/show/NCT01973049?term=bms-791325&rank=2v>

Acknowledgments

- The authors thank the patients, their families, and staff at all study sites
- The authors thank the following study Investigators:
 - Norman Gitlin, MD
 - Tadesse Desta, MD
 - Michael Bennett, MD
 - Harvey Tatum, MD
 - Reem Ghalib, MD
 - David Morris, DO
 - Tuan Nguyen, MD
- The authors thank Ellen Chung, Helen Zhou, Bhaskar Rege, Megan Wind-Rotolo, Amber Griffies, Carolyn LeFante, Patricia Mingela, Jennifer Hould, Jennifer Putnam, Shaun Langdon, Kelli Rotondo, Myra Borsos, Janice Wiggan, Diane Clark, Jie Yin, Fei Yu, Joseph Ueland, Dennis Hernandez, and all BMS research staff for their contributions
- ClinicalTrials.gov, registration number NCT01455090 (Study AI443-014)