

## Patients With Decompensated Cirrhosis

### Recommended for All Patients With HCV Infection Who Have Decompensated Cirrhosis <sup>i</sup>

RECOMMENDED	RATING <sup>i</sup>
Patients with HCV infection who have decompensated cirrhosis—moderate or severe hepatic impairment, ie, Child-Turcotte-Pugh (CTP) class B or class C—should be referred to a medical practitioner with expertise in that condition, ideally in a liver transplant center.	I, C

### Decompensated Cirrhosis Genotype 1-6

Recommended regimens listed by pangenotypic, evidence level and alphabetically for:

### Patients With Decompensated Cirrhosis<sup>a</sup> Who Have Genotype 1-6 and Are Ribavirin Eligible

RECOMMENDED	DURATION	RATING <sup>i</sup>
<b>Genotype 1-6:</b> Daily fixed-dose combination of sofosbuvir (400 mg)/velpatasvir (100 mg) with weight-based ribavirin <sup>b</sup>	12 weeks	I, A <sup>c</sup>
<b>Genotype 1, 4, 5, or 6 only:</b> Daily fixed-dose combination of ledipasvir (90 mg)/sofosbuvir (400 mg) with low initial dose of ribavirin (600 mg, increase as tolerated to weight-based dose)	12 weeks	I, A <sup>d</sup>

<sup>a</sup> Includes CTP class B and class C patients who may or may not be candidates for liver transplantation, including those with hepatocellular carcinoma.


<sup>b</sup> Low initial dose of ribavirin (600 mg) is recommended for patients with CTP class C cirrhosis; increase as tolerated.

<sup>c</sup> Only available data for genotype 6 are in patients with compensated cirrhosis.

<sup>d</sup> Only available data for genotypes 5 and 6 are in a small number of patients with compensated cirrhosis.

Recommended regimens listed by pangenotypic, evidence level and alphabetically for:

### Patients With Decompensated Cirrhosis<sup>a</sup> Who Have Genotype 1-6 and Are Ribavirin Ineligible

RECOMMENDED	DURATION	RATING 
<b>Genotype 1-6:</b> Daily fixed-dose combination of sofosbuvir (400 mg)/velpatasvir (100 mg)	24 weeks	I, A <sup>b</sup>
<b>Genotype 1, 4, 5, or 6 only:</b> Daily fixed-dose combination of ledipasvir (90 mg)/sofosbuvir (400 mg)	24 weeks	I, A <sup>c</sup>


<sup>a</sup> Includes CTP class B and class C patients who may or may not be candidates for liver transplantation, including those with hepatocellular carcinoma.

<sup>b</sup> Only available data for genotype 6 are in patients with compensated cirrhosis.

<sup>c</sup> Only available data for genotypes 5 and 6 are in a small number of patients with compensated cirrhosis.

Recommended regimens listed by pangenotypic, evidence level and alphabetically for:

### Patients With Decompensated Cirrhosis<sup>a</sup> and Genotype 1-6 Infection in Whom Prior Sofosbuvir- or NS5A Inhibitor-Based Treatment Failed

RECOMMENDED	DURATION	RATING 
<b>Genotype 1-6:</b> Daily fixed-dose combination of sofosbuvir (400 mg)/velpatasvir (100 mg) with weight-based ribavirin <sup>b</sup>	24 weeks	II, C <sup>c</sup>
<b>Prior sofosbuvir-based treatment failure, genotype 1, 4, 5, or 6 only:</b> Daily fixed-dose combination of ledipasvir (90 mg)/sofosbuvir (400 mg) with low initial dose of ribavirin (600 mg; increase as tolerated)	24 weeks	II, C <sup>d</sup>

<sup>a</sup> Includes CTP class B and class C patients who may or may not be candidates for liver transplantation, including those with hepatocellular carcinoma.

<sup>b</sup> Low initial dose of ribavirin (600 mg) is recommended for patients with CTP class C cirrhosis.

<sup>c</sup> Only available data for genotypes 5 and 6 are in a small number of patients with compensated cirrhosis.

<sup>d</sup> Only available data for genotype 6 are in patients with compensated cirrhosis.

Regimens not recommended for:

### Patients With Decompensated Cirrhosis (Moderate or Severe Hepatic Impairment; Child-Turcotte-Pugh Class B or C)

NOT RECOMMENDED	RATING 
Any protease inhibitor-containing regimen (eg, glecaprevir, grazoprevir, and voxilaprevir).	III, B
Interferon-based regimens	III, B

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