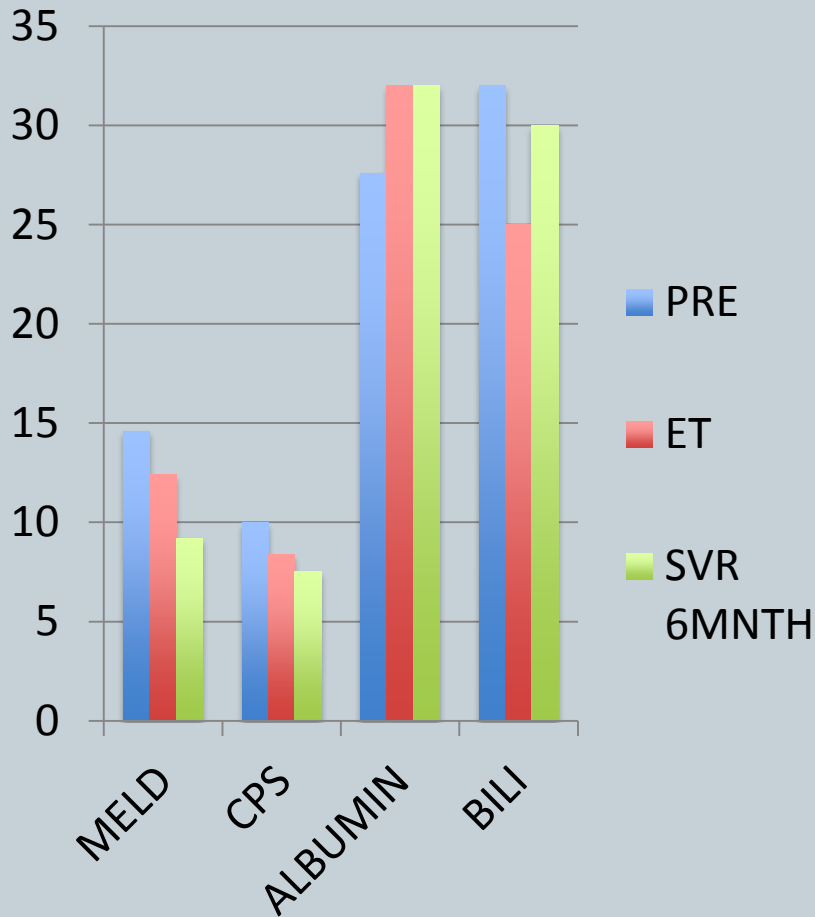


# Interferon free DAAs in Decompensated Cirrhosis



- 20 PTS in Gilead 124/125 STUDIES
- 200 + PTs ( SINCE OCT 2014) in MELD > 15  
COMPASSIONATE USE ( S+ D)
- FCH COMPASSIONATE USE
- ABBVIE COMPASSIONATE USE ( non  
Decompensated)

# Interferon free DAAs in Decompensated Cirrhosis



## ET

- 12/13 improvement in albumin
- Only 3/13 sig improvement in ascites
- 2/4 still recurrent paracentesis

## SVR 6 mnths (two relapse)

- 7/7 increase in albumin
- 4/7 sig improvement in ascites
- 0/3 still recurrent paracentesis

Sofosbuvir + Riba ( SVR 4/5)

Sofosbuvir + Ledadasvir (SVR 7/8)

# How to escape MELD Purgatory ?



- 59 yrs female
  - 1972/74
    - ✦ Lived in Indonesia ( worked in an orphanage)
    - ✦ Ears pierced
    - ✦ Abnormal LFTs for a decade
    - ✦ Lethargic but ok
  - 1990
    - ✦ HCV diagnosed
    - ✦ Interferon for 5/12
  - 2013
    - ✦ PR bled
    - ✦ Removal of large colonic polyp
    - ✦ 2 weeks later- went to sleep and couldn't wake up

# How to escape MELD Purgatory



- **Admitted to hospital**
  - PSE + cirrhosis with PHT diagnosed
- **Next 3 mnths**
  - Ascites requiring regular paracentesis
  - Hyponatremia
  - Episodes of E.Coli sepsis
- **Sept 2014**
  - Referred for liver transplanation

# How to escape MELD Purgatory



- **Associated Illness**

- NIDMM

- **Social history**

- Widower
- 3 children
- No alcohol
- Teacher - high school

- **Phys exam**

- Wasted
- Signs of CLD
- Massive ascites

# How to escape MELD Purgatory



- Bili -26umol/l
- Albumin 26 G/L
- MELD 14
- Comment – “ *looks worse than MELD score*”

# How to escape MELD Purgatory



- Continues to require paracentesis ( second weekly)
- Not HCC
- Listed for Liver Transplantation
- G1a / viral load  $-2 \times 10^6$
- Commenced Sofosbuvir + Ledadasvir ( 12 weeks)
- MELD 15 ( bili 59umol/l, Creatinine 52umol/l, INR1.4)

# How to escape MELD Purgatory



- **HCV PCR**

- 523 week 1
- 36 week 2
- <15 week 4
- ND week 6
- ND week 12

MELD improvement based on a decrease in

Bili 66 to 42 umol/l

INR 1.4 to 1.2

**BUT**

- **MELD**

- 12 week 1
- 12 week 2
- 13 week 4
- 12 week 6
- 12 week 12

-Continued requirement for second weekly paracentesis

-Variceal bleed

-Hyponatremia

-Sepsis



# How to escape MELD Purgatory



- **Week 16**
  - Relapse
  - 514,000 copies
- **2 mnths later**
  - Still listed for LTX
  - Commenced on Sofos + Daclatasvir
  - MELD now 15

# How to escape MELD Purgatory



- **Feb 2015 ( week 8 S+D)**
  - Ruptures umbilical hernia
  - Ascitic leak with Small Intestine externalised
  - Viral load 1,000
  - MELD 20
  - Surgical repair and prioritised on waiting list
- **Undergoes successful LTX ( 8 weeks ago)**
- **April 2015**
  - Missed doses of S+ D post surgery
  - Viral load log 3
  - Good allograft function

# How to escape MELD Purgatory ?



- Relapse post AVT AND
- As a result of massive ascites-
  - ✦ Rupture your umbilical hernia !!!

# How to escape MELD Purgatory ?



- **What to do now ?**
  - Essentially has been on Sofosbuvir monotherapy ( presumed NS5A resistance)
  - ? Add in Simeprevir ( only available with Interferon in Australia)
  - Switch to AbbVie 3D ?
  - AVT interrupted by pre LTx surgery and then post LTX thus how long to continue treatment ( currently at 16 weeks)

# Interferon free DAAs in Decompensated Cirrhosis



- **Questions and conclusions**

1. Despite MELD improvement in 12 weeks

- Massive ascites persists in many patients despite rapid viral response

- How long ?

- How many respond ?

- Is it the same for PSE ?

2. Is there a MELD score beyond which AVT is futile ?

- Hence should we just wait until post LTx ?

3. Is 12 weeks enough in these patients ?