were identified as HCV RNA positive, 198 attended secondary care and 99 have commenced treatment to date. The incremental cost-effectiveness ratio (ICER) was determined using a 50-year time horizon.

Results: For a £20, 000 per quality adjusted life year (QALY) gained willingness-to-pay threshold, the HepFriend initiative was cost-effective, mean ICER of £8, 880 per QALY, and would become cost-saving at 45% (£17, 536 per treatment) of the current drug list price. Results are robust to variations in intervention costs and model assumptions.

Conclusion: New models of care that undertake active case-finding with enhanced peer-support to improve testing and treatment uptake amongst marginalised and vulnerable groups could be highly cost-effective and possibly cost-saving.

THU-192

All-oral, 12-week ravidasvir plus ritonavir-boosted danoprevir and ribavirin delivers 100% svr12 in treatment-naive non-cirrhotic hcv genotype 1 patients with resistance-associated substitutions of a phase 2/3 clinical trial in china

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Background and aims: Ravidasvir (RDV) is a pan-genotypic NS5A inhibitor with high barrier to resistance. As reported from phase 2 trial (NCT03020095), all-oral RDV and DNVr in combination with ribavirin achieved the SVR12 rate of 100% (38/38) in treatment-naïve non-cirrhotic patients with HCV GT1 infection in Taiwan. This s a subanalysis of phase 2/3 study of RDV and DNVr in combination with ribavirin regimen for treatment-naïve HCV genotype 1 (GT1) patients without cirrhosis in a large population in China Mainland.

Method: In this multi-center, randomized, double-blind, placebo-controlled phase 2/3 trial (NCT03362814), we enrolled 424 treatment-naïve, non-cirrhotic adult HCV GT1 patients from 42 sites in different provinces of China. These patients were randomized 3 : 1 to receive a combination of RDV 200 mg once daily plus DNVr 100 mg/100 mg twice daily and oral ribavirin 1000/1200 mg/day (body weight < 75/ ≥ 75 kg) (n = 318) or placebo (n = 106) for 12 weeks, then patients in the placebo group went on to receive 12 weeks' treatment with the above combination. The primary efficacy end point was the sustained virologic response rate 12 weeks after the end of treatment (SVR12) using the CAP/CTMHCV 2.0 assay (LLOQ = 15 IU/ml).

Results: Of the 424 patients (mean age 45yrs, range 21~73 yrs) enrolled, 47% were male, 82%(348/424) was IL-28B CC genotype, and most of the patients (305/424, 72%) had HCV RNA ≥ 800, 000 IU/ml at baseline. All patients had NS5A testing at baseline, with 76 patients (76/309, 25%, PPS) in the treatment group and 29 patients in the placebo group (29/101, 29%, PPS) having detectable RASs in the NS5A region. The most common NS5A RASs were R30Q (38/309, 12.3%), Y93H (21/309, 6.8%) and R30Q/Y93H (8/309, 2.6%) in the treatment group and R30Q (21/101, 20.8%), Y93H (6/101, 5.9%), R30Q/Y93H (1/101, 0.99%) in the placebo group. The overall SVR12 was 99.03% (306/309, 95%CI: 97.19%~99.80%, PPS)and 99.01% (100/101, 95%CI: 94.61%, 99.97%, PPS) respectively for the treatment group and the placebo group. All patients with baseline NS5A RAS from the treatment group (76/76, PPS) and the placebo group (29/29, PPS) achieved SVR12. 3 patients (3/309, 0.97%, PPS) in the treatment group experienced virologic breakthrough and 1 patient in the placebo group relapsed (1/101, 0.99%, PPS), none of them had RASs at baseline. No serious AE was assessed by the investigator as related to study drugs. Most of the abnormal laboratory tests of liver function were of mild or moderate severity (grade 1 and grade 2).

Conclusion: For Chinese treatment-naïve non-cirrhotic GT1 HCV adult patients, there was no significant impact of baseline NS5A RASs on SVR12 with 12-week ravidasvir plus ritonavir-boosted danoprevir and ribavirin.

THU-193

4 week treatment for hepatitis C: A randomized controlled trial (4RIBC)

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Background and aims: Since the introduction of Directing Acting Antivirals (DAA) the cure rate of chronic hepatitis C has been over 90% which even includes difficult to treat patients as cirrhotic and treatment experienced patients. Shortening treatment duration