

ACTIVATE:

An international network for HCV therapeutic evaluation among people who inject drugs

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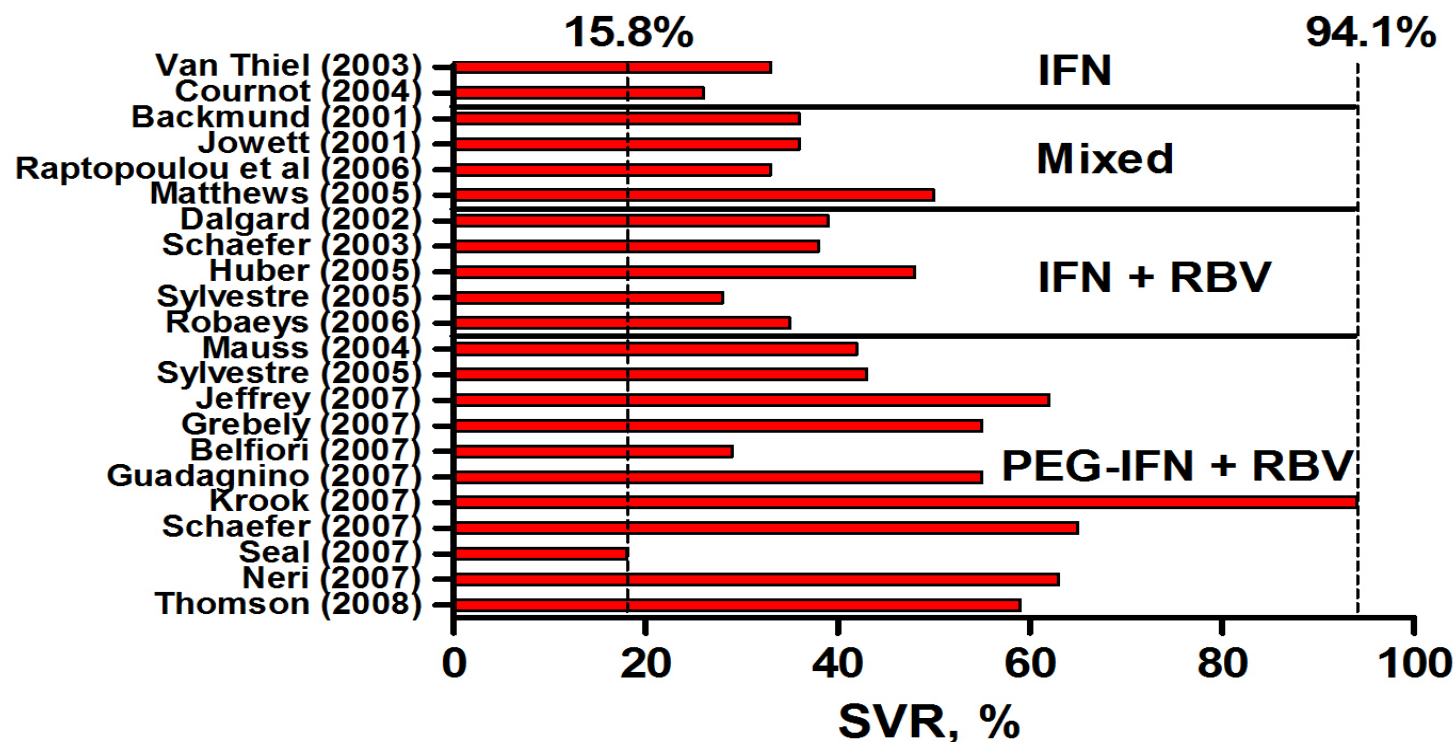
Kirby Institute, University of New South Wales

Sydney, AUSTRALIA

HCV therapeutic evaluation among PWID

- PWID initially excluded from HCV treatment guidelines
- Ongoing concern from some HCV clinicians, re safety, efficacy (including re-infection), and competing morbidity
- Increasing evidence on favorable HCV treatment outcomes, from observational studies, although heterogeneous and small
- Exclusion of PWID from HCV DAA-based phase II/III protocols
- Need for PWID-specific HCV therapeutic evaluation

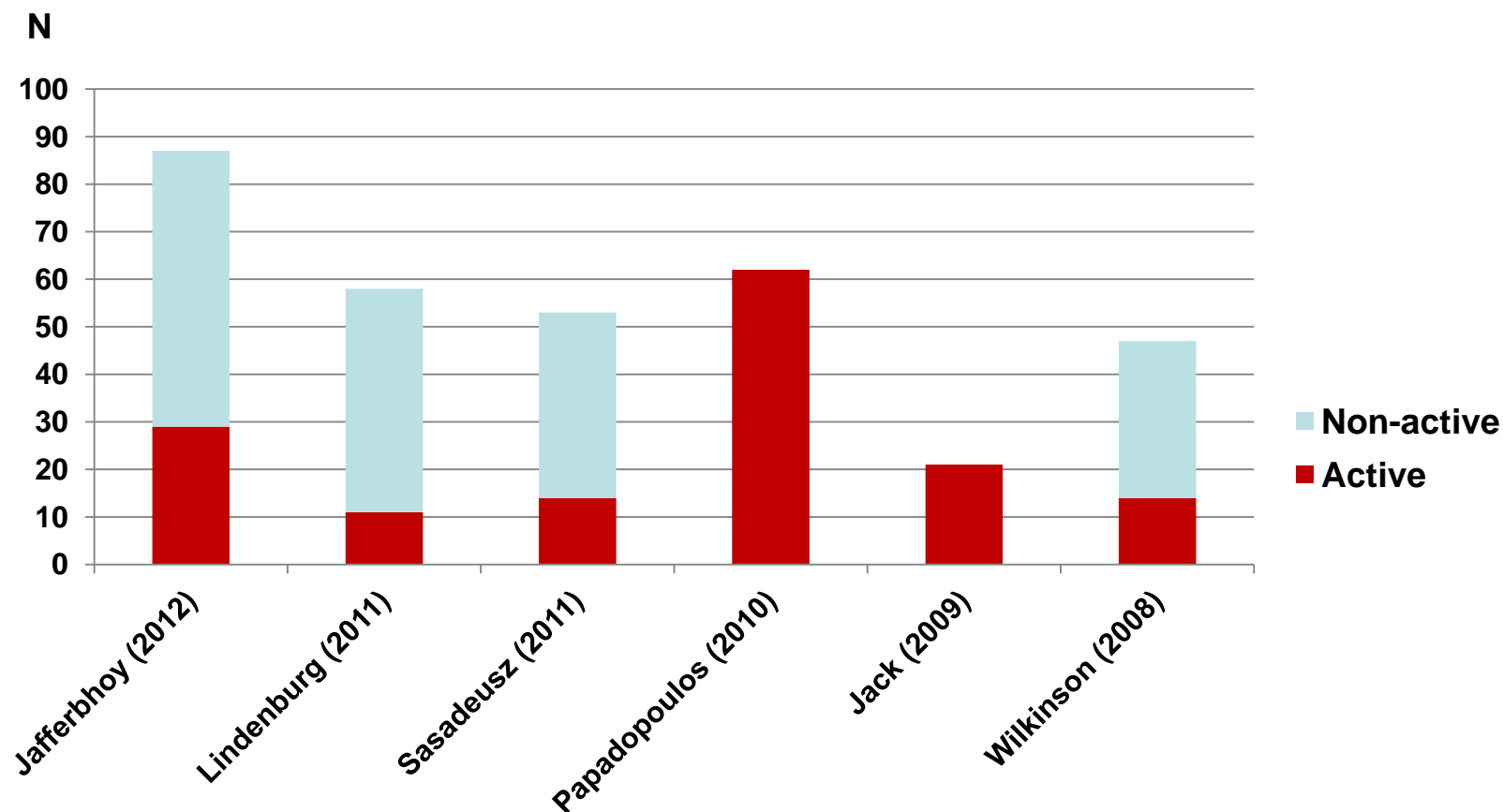
HCV treatment among PWID



Median SVR: All studies = 41%; Peg-IFN alfa + RBV: 54%

HCV treatment among PWID

Active and non-active injecting drug use



ACTIVATE Study

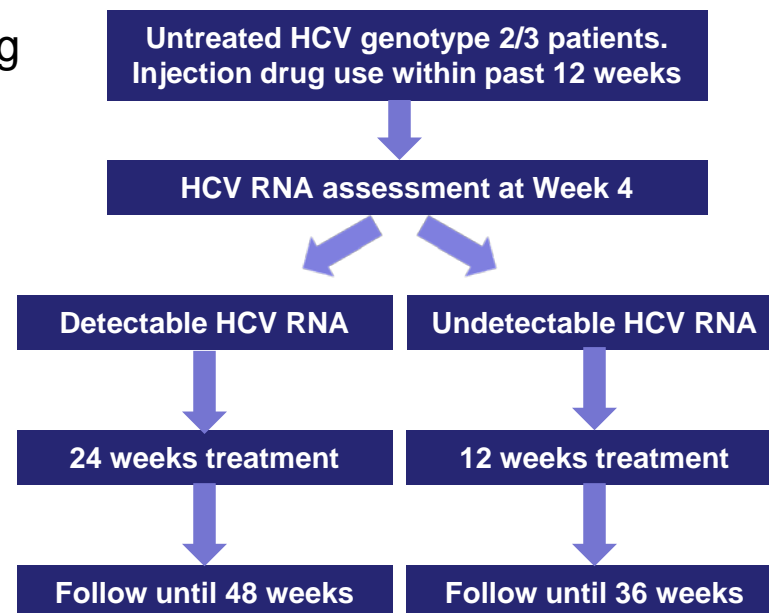
Objectives

- Establish an international network to evaluate HCV therapy among PWID
- Evaluate safety and efficacy of PEG-IFN-alfa2b and RBV for treatment of chronic HCV genotype 2/3 among PWID
- Evaluate shortened therapy (12 weeks) for individuals with rapid virological response

ACTIVATE Study

Key Eligibility Criteria

- Chronic Hep C infection, genotype 2 or 3
- Injection drug use within 12 weeks of screening
- Treatment naive
- N=100



Project Funding and Governance

- Funded by Merck Sharp & Dhome; In-kind contributions from KI and Sites
- Sponsor: University of New South Wales (UNSW), Australia
- Coordinating Centre: Kirby Institute, UNSW

Protocol Steering Committee

Co-Chairs

Olav Dalgard, Norway
Greg Dore, Australia

Committee Members

Markus Backmund, Germany
Philip Bruggmann, Switzerland
Brian Conway, Canada
Graham Foster, UK
Geert Robaeys, Belgium
Jason Grebely, Australia
Pip Marks, Australia
Tracy Swan, USA
(Community representative)

Operational Team (Kirby Institute)

Clinical, scientific and operational oversight

Greg Dore

Jason Grebely

Pip Marks

Study management

Marianne Byrne
Project Coordinator

Sharmila Sri
Data Manager

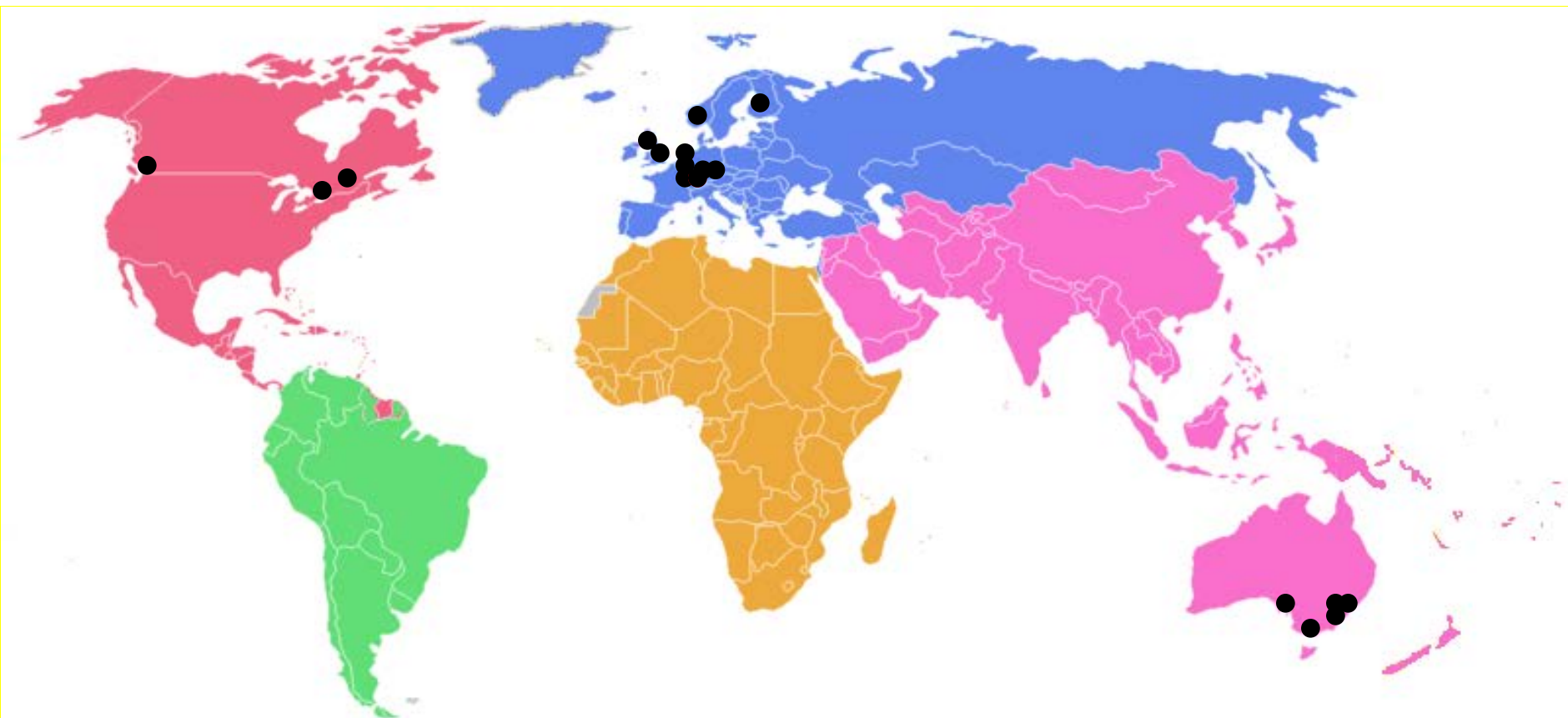
Mahshid Tamaddoni
Data Manager

Dee Bryant
Clinical Trial Assistant

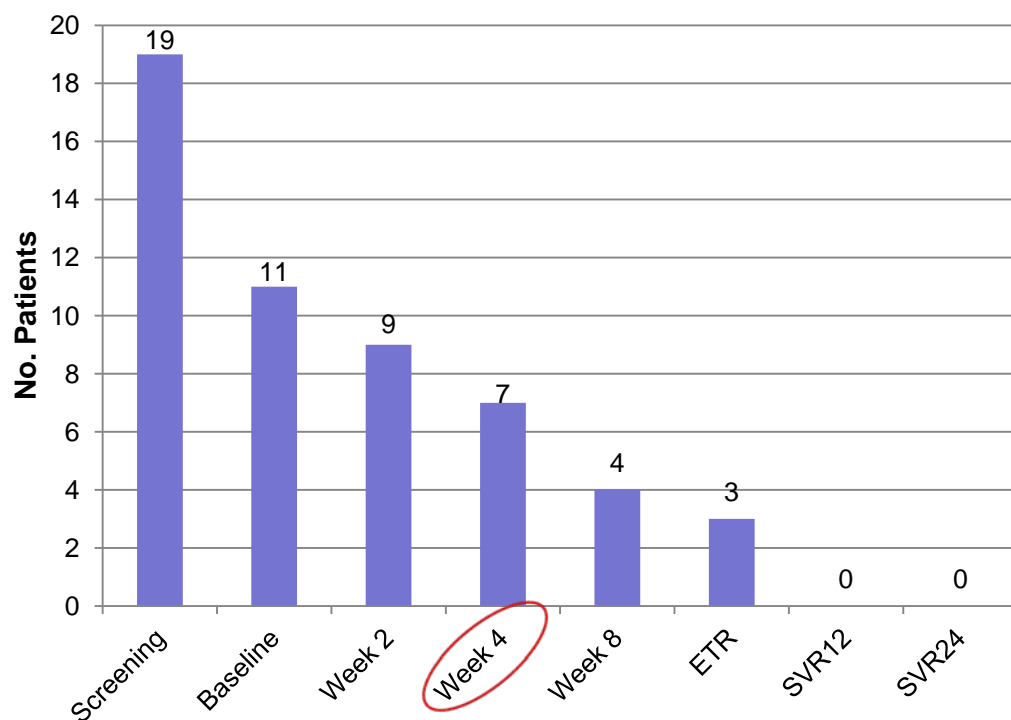
Data Safety and Monitoring Committee

Establishing an international network

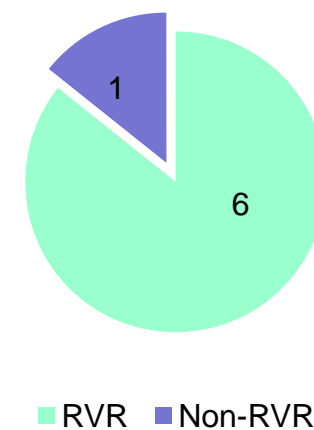
- 19 sites, 8 countries



Subject Progress (at 01 November 2012)



Week 4 HCV RNA



■ RVR ■ Non-RVR

Key challenges in building the network

- Diverse regulatory and ethics committee requirements
- Delays in securing adequate insurance cover
- Heterogeneity across sites in clinical research skills, experience and available resources
- Balance of remote vs. face-to-face training
- Different HCV treatment (PEG-IFN-alfa2b/RBV) guidelines
- Rapidly changing landscape of HCV treatment

Future directions for **ACTIVATE** network

- Discussion with potential collaborating sites for subsequent protocols, including in U.S.
- **ACTIVATE II** protocol likely to involve IFN-free regimens
- Potential for randomised evaluation of therapeutic strategies (e.g. directly observed therapy)
- Expanded study populations to include people on Opioid Substitution Therapy (non-active PWID)
- Public (NIH, NHMRC) and private funding partnerships