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Return to List

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Sofosbuvir in Combination With Pegylated Interferon and Ribavirin and in Treatment-**Naive Hepatitis C-infected Patients**

This study has been completed.

Sponsor:

Gilead Sciences

ClinicalTrials.gov Identifier:

NCT01188772

First Posted: August 25, 2010

Last Update Posted: April 21, 2014

A The safety and scientific validity of this study is the responsibility of the study sponsor and investigators. Listing a study does not mean it has been evaluated by the U.S. Federal Government. Read our disclaimer for details.

Information provided by (Responsible Party):

Gilead Sciences

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Purpose

Genotype 1: Participants with genotype 1 hepatitis C (HCV) infection were randomized to receive sofosbuvir (GS-7977; PSI-7977) 200 mg or 400 mg, or matching placebo, plus pegylated interferon alfa 2a (PEG) and ribavirin (RBV) for 12 weeks, followed by PEG+RBV for an up to an additional 36 weeks. Randomization was stratified by IL28B status (CC, CT, TT) and HCV RNA level (< 800,000 IU/ml or ≥ 800,000 IU/ml) at baseline. Participants were randomized in a 2:2:1 manner; those who achieved an extended ranid virologic response (eRVR) (HCV RNA < lower limit of detection [15 II I/ml] from Weeks A



through 12) received an additional 12 weeks of PEG+RBV. Subjects not achieving eRVR received an additional 36 weeks of PEG+RBV.

Genotype 2 and 3: Participants with genotype 2 or 3 hepatitis C (HCV) received **sofosbuvir** 400 mg plus PEG+RBV for 12 weeks.

Condition	Intervention	Phase
Hepatitis C Virus	Drug: Sofosbuvir Drug: Placebo to match sofosbuvir Drug: PEG Drug: RBV	Phase 2

Study Type: Interventional

Study Design: Allocation: Randomized

Intervention Model: Parallel Assignment

Masking: Quadruple (Participant, Care Provider, Investigator, Outcomes Assessor)

Primary Purpose: Treatment

Official Title: A Multi-center, Placebo-Controlled, Dose Ranging Study to Investigate the Safety,

Tolerability, Pharmacokinetics and Pharmacodynamics Following Oral Administration of PSI-7977 in Combination With Pegylated Interferon and Ribavirin in Treatment-Naïve Patients With Chronic HCV Infection Genotype 1, and an Open Label Assessment of PSI-

7977 in Patients With HCV Genotypes 2 or 3

Resource links provided by NLM:

MedlinePlus related topics: Hepatitis Hepatitis A Hepatitis C

Drug Information available for: Interferon Ribavirin Sofosbuvir

U.S. FDA Resources

Further study details as provided by Gilead Sciences:

Primary Outcome Measures:

Percentage of Participants Who Experienced Adverse Events During the Sofosbuvir Treatment Period
 [Time Frame: Baseline to Week 12 plus 30 days]

Adverse events (AEs) occurring during the sofosbuvir treatment period and for 30 days following the



once if they had a qualifying event.

Secondary Outcome Measures:

- Change in HCV RNA From Baseline to Week 12 [Time Frame: Baseline to Week 12]
- Percentage of Participants With Rapid Virologic Response at Week 4 [Time Frame: Week 4]
 Rapid virologic response was defined as HCV RNA below the limit of detection (< 15 IU/mL) at Week 4 (Day 29)
- Percentage of Participants With Complete Early Virologic Response at Week 12 [Time Frame: Week
 12]

Complete early virologic response was defined as HCV RNA below the limit of detection (< 15 IU/mL) at Week 12

Percentage of Participants With Extended Rapid Virologic Response [Time Frame: Week 4 to Week
 12]

Extended rapid virologic response was defined as HCV RNA below the limit of detection (< 15 IU/mL) at Week 4 (Day 29) which was maintained through Week 12.

 Percentage of Participants With Virologic Response at the End of Treatment [Time Frame: Week 48 (genotype 1) or Week 12 (genotype 2/3)]

End-of-treatment virologic response was defined as HCV RNA below the limit of detection (< 15 IU/mL) at the last on-treatment visit.

 Percentage of Participants With Sustained Virologic Response at Post-treatment Week 12 (SVR12) and 24 (SVR24) [Time Frame: Post-treatment Weeks 12 and 24]

SVR12 and SVR24 were defined as HCV RNA below the limit of detection (< 15 IU/mL) at post-treatment Weeks 12 and 24, respectively.

 Plasma Pharmacokinetics of GS-331007 (Cmax at Day 8) [Time Frame: 1, 2, 4, 8, and 12 hours postdose]

The pharmacokinetics of sofosbuvir metabolite GS-331007 were analyzed as the maximum observed concentration of drug in plasma (Cmax) at Day 8. Blood samples were collected at 1, 2, and 4 hours postdose for all participants, and at 8 and 12 hours postdose for participants enrolled at selected sites.



 Plasma Pharmacokinetics of GS-331007 (Cmax at Day 15) [Time Frame: 1, 2, 4, 8, and 12 hours postdose]

The pharmacokinetics of sofosbuvir metabolite GS-331007 were analyzed as the Cmax at Day 15. Blood samples were collected at 1, 2, and 4 hours postdose for all participants, and at 8 and 12 hours postdose for participants enrolled at selected sites.

 Plasma Pharmacokinetics of GS-331007 (Cmax at Day 29) [Time Frame: 1, 2, 4, 8, and 12 hours postdose]

The pharmacokinetics of sofosbuvir metabolite GS-331007 were analyzed as the Cmax at Day 29. Blood samples were collected at 1, 2, and 4 hours postdose for all participants, and at 8 and 12 hours postdose for participants enrolled at selected sites.

 Plasma Pharmacokinetics of GS-331007 (AUCtau at Day 8) [Time Frame: 1, 2, 4, 8, and 12 hours postdose]

The pharmacokinetics of sofosbuvir metabolite GS-331007 were analyzed as the the area under the plasma concentration versus time curve over the dosing interval (AUCtau) at Day 8. Blood samples were collected at 1, 2, and 4 hours postdose for all participants, and at 8 and 12 hours postdose for participants enrolled at selected sites.

 Plasma Pharmacokinetics of GS-331007 (AUCtau at Day 15) [Time Frame: 1, 2, 4, 8, and 12 hours postdose]

The pharmacokinetics of sofosbuvir metabolite GS-331007 were analyzed as the the area under the plasma concentration versus time curve over the dosing interval (AUCtau) at Day 15. Blood samples were collected at 1, 2, and 4 hours postdose for all participants, and at 8 and 12 hours postdose for participants enrolled at selected sites.

Plasma Pharmacokinetics of GS-331007 (AUCtau at Day 29) [Time Frame: 1, 2, 4, 8, and 12 hours postdose]

The pharmacokinetics of sofosbuvir metabolite GS-331007 were analyzed as the the area under the plasma concentration versus time curve over the dosing interval (AUCtau) at Day 29. Blood samples were collected at 1, 2, and 4 hours postdose for all participants, and at 8 and 12 hours postdose for participants enrolled at selected sites.

Percentage of Participants Who Developed Resistance to Sofosbuvir [Time Frame: Baseline to Week
 12]

Resistance monitoring was completed in all subjects who received sofosbuvir and who had non-



Enrollment: 147

Study Start Date: August 2010
Study Completion Date: May 2012

Primary Completion Date: April 2011 (Final data collection date for primary outcome measure)

Arms	Assigned Interventions	
Experimental: Sofosbuvir 200 mg (Genotype 1) Participants with genotype 1 HCV infection were randomized to receive sofosbuvir 200 mg (2 x 100 mg tablets)+placebo to match sofosbuvir (2 tablets)+PEG+RBV for 12 weeks followed by PEG+RBV for up to an additional 36 weeks.	Drug: Sofosbuvir Sofosbuvir tablets were administered orally once daily. Other Names: • Sovaldi® • GS-7977 • PSI-7977 Drug: Placebo to match sofosbuvir Placebo tablets to match sofosbuvir were administered orally once daily. Drug: PEG Pegylated interferon alfa-2a (PEG) 180 μg was administered once weekly by subcutaneous injection. Other Name: Pegasys® Drug: RBV Ribavirin (RBV) was administered as a tablet orally according to package insert dosing recommendations (Genotype 1: < 75kg = 1000 mg and ≥ 75 kg = 1200 mg; Genotype 2/3: 800 mg). Other Name: Copegus®	
Experimental: Sofosbuvir 400 mg (Genotype 1) Participants with genotype 1 HCV infection were randomized to receive sofosbuvir 400 mg (4 x 100 mg tablets)+PEG+RBV for 12 weeks followed by PEG+RBV for up to an additional 36 weeks.	Drug: PEG Pegylated interferon alfa-2a (PEG) 180 µg was administered once weekly by subcutaneous injection. Other Name: Pegasys®	



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