

Hepatitis B (HBV) is treated with either an oral antiviral medication over the long-term. Recommendations may be different in HIV co-infection. See drug page or package insert for complete information on dosage and treatment duration requirements.



ADULTS (AGES 16 AND OLDER): Treatment naïve with compensated liver disease, one 0.5 mg tablet once daily.

ADULTS WITH DECOMPENSATED LIVER DISEASE: One 1 mg tablet once per day. Dose adjustments needed for individuals with kidney disease or significant toxicity. See package insert and consult a medical provider for more detail. PEDIATRIC PATIENTS (AGES 2–15) WEIGHING AT LEAST 22 POUNDS (10 KG): Dosing based on weight and should be done in consultation with an experienced medical provider. An oral solution is also available for pediatrics.

Baraclude should always be taken on an empty stomach (no food 2 hours before or 2 hours after taking pill). Tablet and solution are interchangeable. Solution may be used for reduced doses in people with kidney disease.

■ Generic tablet available.



ADULTS AND ADOLESCENTS AGES 12 AND OLDER: One 25 mg tablet once daily, with food.

Not recommended for individuals with kidney disease if creatinine clearance is below 15 mL per minute who are not receiving chronic hemodialysis or for individuals with decompensated cirrhosis. Not FDA approved for children.



tenofovir disoproxil fumarate (TDF)

ADULTS AND PEDIATRIC PATIENTS WEIGHING AT LEAST 77 POUNDS/35 KG): One 300 mg tablet, once per day.

PEDIATRIC PATIENTS AGE 2 AND OLDER WEIGHING AT LEAST 22 POUNDS (10 KG): Oral powder and smaller pediatric tablets available for children. Pediatric dose is based upon weight.

All doses to be taken with or without food. Dose adjustment needed for adults with kidney disease. See drug page and consult a medical provider for more information. ■ Generic available for 300 mg tablets, not for pediatric or powder.

FDA approved HBV medications that are rarely prescribed or are not preferred:







peginterferon alfa-2a (PEG-IFN)

Hepatitis C (HCV) is treated with either a fixed-dose combination (FDC) medication or in combination with other Direct Acting Antiviral (DAA) agents for 8-12 weeks for most patients; rarely some people need up to 24 weeks (see drug page). The majority are approved for HIV/HCV co-infection. See drug page or package insert for complete information on dosage and treatment duration requirements. These are AASLD/IDSA recommended FDA-approved medications for both treatment-naïve and treatment-experienced patients.



sofosbuvir/velpatasvir (SOF/VEL) GENOTYPE 1 2 3 4 5 6

ADULTS AND PEDIATRIC PATIENTS WEIGHING AT LEAST 66 POUNDS (30 KG): One tablet once daily, with or without food.

PEDIATRIC PATIENTS AGE 3 AND OLDER WEIGHING LESS THAN 66 POUNDS (30 KG): Dosing is weight-based, using either lower-dose tablets or FDA-approved pellets. Ribavirin may be included in patients with decompensated cirrhosis.

■ Authorized generic available for the tablets.



ledipasvir/sofosbuvir (SOF/LDV) GENOTYPE **1 4 5 6**

Each tablet contains 90 mg ledipasvir and 400 mg sofosbuvir.

ADULTS AND PEDIATRIC PATIENTS WEIGHING AT LEAST 77 POUNDS (35 KG): One 90mg ledipasvir / 400mg sofosbuvir tablet once daily, with or without food. PEDIATRIC PATIENTS 3 YEARS OF AGE AND OLDER, WEIGHING LESS THAN 77 POUNDS (35 KG):

Dosing is weight-based; lower-dose tablets and FDA-approved pellets are available for pediatrics.

Ribavirin may be added in people with decompensated cirrhosis or liver transplant recipients with cirrhosis (compensated or decompensated).

■ Authorized generic 90mg-400mg tablets available.



Mavyret glecaprevir/pibrentasvir (GLE/PIB) GENOTYPE 1 2 3 4 5 6

ADULTS AND PEDIATRIC PATIENTS AT LEAST 12 YEARS OF AGE AND WEIGHING AT LEAST 99 POUNDS (45 KG): Three tablets once daily with food; may be taken by those with compensated cirrhosis.

PEDIATRIC PATIENTS AGE 3 AND OLDER AND WEIGHING LESS THAN 99 POUNDS (45 KG): Dosing is weight-based, using lower-dose pellets.

Lower dose pellets are available for pediatric patients up to 3 years of age and weighing less than 99 lbs. (45 kg)

Contraindicated in decompensated cirrhosis.



Vosevi

sofosbuvir/velpatasvir/voxilaprevir (SOF/VEL/VOX) GENOTYPE 1 2 3 4 5 6

Each tablet contains 400 mg sofosbuvir, 100 mg velpatasvir, 100 mg voxilaprevir. One tablet once daily, with food; may be taken by those with compensated cirrhosis. Not recommended in people with moderate or severe liver impairment. Not FDA approved for use in co-infection, but may be considered.

FDA approved HCV medications that are rarely prescribed or are not preferred:







ribavirin



Zepatier grazoprevir/elbasvir (GZR/EBR)

Drug chart information is current as of July 1, 2024. For the complete 2024 POSITIVELY AWARE Hepatitis Drug Guide, go to positivelyaware.com To request additional copies of the Hepatitis Drug Guide or Chart, email distribution@positivelyaware.com. Special thanks to Kaitlyn Rueve, PharmD, BCPS, AAHIVP. SOURCES: Medication prescribing information and the American Association for the Study of Liver Diseases (AASLD).

