New and Improved Treatment for Hep C

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In the mid-1990s, protease inhibitors and combo therapy revolutionized HIV treatment, making it more effective and easier to take. Now hepatitis C's moment is arriving, as new meds and strategies promise to improve therapy, even for people with hard-to-treat genotype 1.

- New drugs: The FDA has approved two hep C protease inhibitors—Incivek (telaprevir) and Victrelis (boceprevir). Both promise to make standard treatment shorter for many and more effective for most. Alisporivir is the first in another new class, cyclophilin inhibitors, to get past the first clinical trials. All these must be taken with the standard interferon/ribavirin regimen.
- Improved interferon: An experimental interferon—Peg-Interferon lambda (IFN λ)—appears to be more effective and cause fewer side effects than standard pegylated interferon alpha. (Both must be taken with ribavirin.)
- Treatment without interferon: Several experimental drug combos look good in very early trials, attacking hep C without the standard pegylated interferon/ribavirin.
- Statins: Combining a cholesterol-lowering drug (fluvastatin/Lescol did best) with standard hep C therapy improved people's responses.

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