

Supplemental table S1: Treatment regimens and SVR rates in the intention-to-treat population (ITT3)

Treatment regimen	Duration of treatment (weeks)	SVR (n)	SVR (%)	Patients with cirrhosis (n)	Cirrhosis (%)	All patients (ITT3, n)
BOC/IFN/RBV	other	3	50.0%	0	0.00%	6
DCV/SIM	n.a.	0	0.0%	1	50.0%	2
DCV/SOF	12	298	96.1%	67	21.6%	310
DCV/SOF	24	153	95.0%	138	85.7%	161
DCV/SOF	other	39	92.9%	16	38.1%	42
DCV/SOF/RBV	12	9	81.8%	7	63.6%	11
DCV/SOF/RBV	24	29	93.5%	28	90.3%	31
DCV/SOF/RBV	other.	4	80.0%	3	60.0%	5
DCV/SOF/SIM	n.a.	1	100.0%	1	100.0%	1
IFN/RBV	48	1	50.0%	0	0.0%	2
IFN/RBV	other.	13	59.1%	0	0.0%	22
LDV/SOF	12	1,164	95.2%	175	14.3%	1,223
LDV/SOF	24	106	94.6%	94	83.9%	112
LDV/SOF	8	829	93.9%	22	2.5%	883
LDV/SOF	other.	120	79.5%	20	13.3%	151
LDV/SOF/RBV	12	329	91.6%	253	70.5%	359
LDV/SOF/RBV	24	65	92.9%	60	85.7%	70
LDV/SOF/RBV	8	6	85.7%	2	28.6%	7
LDV/SOF/RBV	other	37	80.4%	36	78.3%	46
OBV/PTV/r	n.a.	6	75.0%	1	12.5%	8
OBV/PTV/r/RBV	n.a.	4	100.0%	2	50.0%	4
OBV/PTV/r+DSV	12	316	92.4%	31	9.1%	342
OBV/PTV/r+DSV	24	2	100.0%	2	100.0%	2
OBV/PTV/r+DSV	other	27	81.8%	2	6.1%	33
OBV/PTV/r+DSV/RBV	12	266	97.4%	119	43.6%	273
OBV/PTV/r+DSV/RBV	24	12	100.0%	11	91.7%	12
OBV/PTV/r+DSV/RBV	other	30	68.2%	20	45.5%	44
SIM/IFN/RBV	n.a.	3	75.0%	1	25.0%	4
SIM/SOF	12	215	87.8%	152	62.0%	245
SIM/SOF	24	2	100.0%	0	0.0%	2
SIM/SOF	other	12	80.0%	8	53.3%	15
SIM/SOF/RBV	12	29	93.5%	21	67.7%	31
SIM/SOF/RBV	24	4	100.0%	3	75.0%	4
SIM/SOF/RBV	other	2	33.3%	4	66.7%	6
SOF	n.a.	1	100.0%	0	0.0%	1
SOF/IFN	n.a.	0	0.0%	0	0.0%	1
SOF/IFN/RBV	n.a.	280	84.3%	66	19.9%	332
SOF/RBV	24	17	60.7%	10	35.7%	28
SOF/RBV	other.	4	80.0%	2	40.0%	5
TVR/IFN/RBV	other.	2	40.0%	0	0.0%	5
TVR/IFN/RBV	24	2	100.0%	0	0.0%	2
TVR/IFN/RBV	48	3	100.0%	0	0.0%	3
Total		4,445	91.7%	1,378	28.4%	4,846

ITT: intention-to-treat, SVR: sustained virological response, SOF: sofosbuvir, IFN: interferon, RBV: ribavirin, SIM: simeprevir, DCV: daclatasvir, LDV: ledipasvir, OBV: ombitasvir, PTV/r: paritaprevir/ritonavir, DSV: dasabuvir;

Supplements:

Material and Methods; Data collection and monitoring:

Patient data were recorded via a web browser based Electronic Data Capture (EDC) system without software installation on site (BEO, e.factum GmbH) hosted at a Clinical Research Organization (CRO). Data quality was reviewed by study monitors via plausibility checks to assure completeness and accuracy. On-site monitoring was conducted in randomly selected sites and when queries had to be solved.

Material and Methods, Statistics:

Due to the ongoing nature of the study, the status of data for this analysis was frozen on June 30, 2016. The statistical analysis was descriptive to reflect the clinical routine as intended by the physicians. Summary statistics (mean, median, standard deviation, 25th percentile, 75th percentile, minimum, maximum, number of values) or frequencies and proportions were assessed dependent on the scale level of the data. Data of specific quantitative variables (platelets, glomerular filtration rate, albumin, HCV-RNA and age) were categorized into groups based on common clinical criteria. In advance, all relevant variables needed to describe the genotype 1 sample were defined in a statistical analysis plan. Univariate and multivariate analyses (logistic regression model (LR), with 95% confidence intervals for the odds ratio (OR) were calculated. Differences were considered significant at $p \leq 0.05$. In case of missing data only the available data were analyzed, i.e. missing data were ignored. Analyses were calculated using SPSS Windows Release 22.0.0.2 (IBM©, USA).