



AbbVie's Hep C Regimen Viekirax Is Safe, Effective Among Those With Kidney Disease

In a recent study, outcomes between those with and without chronic kidney disease were comparable.

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For people with genotype 1b of hepatitis C virus (HCV), having chronic kidney disease (CKD) does not affect the safety or efficacy of the hep C regimen Viekirax (ombitasvir/paritaprevir/ritonavir), Healio reports.

Publishing their findings in *Hepatology Research*, scientists conducted a retrospective multicenter study of 12 weeks of Viekirax treatment among 235 people with genotype 1b of HCV.

The participants ranged between 27 and 89 years old and had an average age of 67. A total of 181 participants did not have CKD and 54 had CKD but were not on dialysis. CKD was defined as having an estimated glomerular filtration rate (eGFR) below 60 milliliters per minute per 1.73 meters squared.

The study authors looked at three clinical outcomes, including the rates of rapid virologic response (RVR, indicating a rapid decline to an undetectable viral load during treatment), end of treatment response (ETR, whether there is an undetectable viral load at the end of treatment) and the sustained virologic response 12 weeks after completing therapy (SVR12, considered a cure, meaning the viral load is still undetectable at this point).

Among the study group as a whole, the rates of RVR, ETR and SVR were 78.7 percent, 98.7 percent and 98.7 percent respectively. Among those without CKD, the RVR rate was 77.3 percent, the ETR rate was 98.9 percent and the SVR rate was 98.9 percent. Among those with CKD, the RVR rate was 83.3 percent, the ETR rate was 98.1 percent and the SVR rate was 98.1 percent.

The researchers' analysis indicated that there was no significant difference in these rates based on CKD status. The same held true for rates of adverse health events during treatment, which were reported by 21 percent of those without CKD and 27.8 percent of those with the condition.

Among those with CKD, their eGFR level did not change significantly during treatment.

To read the Healio article, [click here](#).

To read the study abstract, [click here](#).

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