Got Kidney Disease? You Can Still Beat Hep C

This is according to an analysis of a large group of veterans.

December 3, 2018 By Benjamin Ryan

People with hepatitis C virus (HCV) who also have chronic kidney disease (CKD), a group for whom the virus was once considered hard to treat, can now do well on direct-acting antiviral (DAA) therapy.

Researchers analyzed medical records data on those recently treated for hep C at Veterans Health Administration health care facilities.

Out of more than 13,500 people who received Harvoni (ledipasvir/sofosbuvir) and nearly 4,000 who received the Viekira regimen (ombitasvir/paritaprevir/ritonavir; dasabuvir), a respective 14 percent and 9 percent had Stage 3 CKD and a respective 1 percent and 3 percent had Stage 4 or 5 CKD. Sixty-eight percent of those given Harvoni and 74 percent of those given the Viekira regimen completed treatment; 98 percent of each group was cured of hep C. More advanced CKD was not associated with a lower likelihood of achieving a cure.

Of those who started treatment with an eGFR of greater than 60, an indication of higher kidney function, 30 to 38 percent experienced a greater than 10-point drop. Among those with Stage 4 or 5 CKD, zero to 6 percent experienced a greater than 10-point drop in their eGFR.

Rates of grade 3 or 4 anemia were higher among those with Stage 4 or 5 CKD. Ribavirin did not appear to affect the rates of such severe anemia.

“We found the newer all-oral directly acting antiviral regimens to be as effective in eradicating HCV in the CKD population as in the non-CKD population,” says the study’s lead author, Adeel Ajwad Butt, MD, MS, a professor of medicine at Weill Cornell Medical College in New York City. “This study provides assurance to patients and providers that patients with CKD can be now be effectively treated with the newer all-oral DAA regimens.”

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