Hep C Treatment Works Well for Those With Chronic Kidney Disease

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

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

Publishing their findings in Alimentary Pharmacology & Therapeutics, researchers analyzed medical records data from the ERCHIVES database of patients at Veterans Health Administration health care facilities. They identified people treated with Harvoni or the Viekira regimen between October 30, 2014 and April 30, 2016.

Out of 13,663 people who received Harvoni with or without ribavirin, 14 percent had Stage 3 CKD and 1 percent had Stage 4 or 5 CKD. A total of 67.8 percent of those given Harvoni completed treatment; 98.2 percent of them achieved a sustained virologic response 12 weeks after completing therapy (SVR12, considered a cure). Neither treatment completion nor cure rates were lower among those with more advanced CKD.

Among 3,961 people who received the Viekira regimen, 9 percent had Stage 3 CKD and 3 percent had Stage 4 or 5 CKD. Seventy-four percent completed therapy and 98.2 percent of that group was cured. Although those who had Stage 4 or 5 CKD and those who received ribavirin had lower treatment completion rates, these factors did not affect cure rates among those who finished treatment.

Of those who started treatment with an eGFR of greater than 60, 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.

To read the study abstract, click here.

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