Ledipasvir-Sofosbuvir in Renal Disease

ERCHIVES-Renal

Ledipasvir-Sofosbuvir in Renal Disease
ERCHIVES-Renal: Study Design

<table>
<thead>
<tr>
<th>ERCHIVES-Renal Study Design</th>
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<td><strong>Design:</strong> Retrospective observational cohort review in Veterans Administration system to determine the effectiveness and safety of HCV treatment in persons with renal disease using two regimens: (1) ledipasvir-sofosbuvir, with or without ribavirin, and (2) ombitasvir-paritaprevir-ritonavir and dasabuvir, with or without ribavirin</td>
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<td><strong>Entry Criteria</strong></td>
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<td>- Chronic HCV genotype 1-6 (most with genotype 1)</td>
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<td>- Baseline chronic kidney disease (CKD stage 1-5 included)</td>
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<td>- Compensated cirrhosis allowed</td>
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<td>- Persons with HIV were excluded</td>
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<td><strong>End-Points:</strong> Primary = SVR12, treatment completion, and safety</td>
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Ledipasvir-Sofosbuvir in Renal Disease
ERCHIVES-Renal: Results

ERCHIVES-Renal: Ledipasvir-Sofosbuvir in Chronic Kidney

**Ledipasvir-Sofosbuvir in Renal Disease**

**ERCHIVES-Renal: Results**

**ERCHIVES-Renal: Ledipasvir-Sofosbuvir in Chronic Kidney Disease**

The diagram illustrates the percentage of persons (%) with Grade 3/4 anemia in different stages of chronic kidney disease (CKD) under two treatment regimens: Ledipasvir-Sofosbuvir and Ledipasvir-Sofosbuvir + Ribavirin.

- **CKD Stage 1-2**
  - Ledipasvir-Sofosbuvir: 1.1%
  - Ledipasvir-Sofosbuvir + Ribavirin: 1.4%
  - Note: 83/7630 (Ledipasvir-Sofosbuvir) and 47/3294 (Ledipasvir-Sofosbuvir + Ribavirin)

- **CKD Stage 3**
  - Ledipasvir-Sofosbuvir: 3.2%
  - Ledipasvir-Sofosbuvir + Ribavirin: 7.3%
  - Note: 43/1345 (Ledipasvir-Sofosbuvir) and 35/479 (Ledipasvir-Sofosbuvir + Ribavirin)

- **CKD Stage 4-5**
  - Ledipasvir-Sofosbuvir: 9.7%
  - Ledipasvir-Sofosbuvir + Ribavirin: 10.0%
  - Note: 10/103 (Ledipasvir-Sofosbuvir) and 3/30 (Ledipasvir-Sofosbuvir + Ribavirin)

**Source:** Butt AA, et al. *Aliment Pharmacol Ther.* 2018;48:35-43
Conclusions: “Ledipasvir-sofosbuvir and Ombitasvir-paritaprevir-ritonavir plus dasabuvir achieved high SVR rates in chronic kidney disease population. Treatment completion rates were lower than expected. A decline in eGFR and development of anaemia were observed in a substantial proportion of persons, but the clinical implications remain unclear.”
This slide deck is from the University of Washington’s *Hepatitis C Online* and *Hepatitis Web Study* projects.

**Hepatitis C Online**
[www.hepatitisc.uw.edu](http://www.hepatitisc.uw.edu)

**Hepatitis Web Study**

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