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## Update on HCV therapy in renal disease and in renal transplant recipients

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**H**epatitis C Virus (HCV) is a common infection especially in the cohort of patients with renal failure. Due to new antiviral approaches and the approval of Direct-Acting Antiviral Agents (DAA), HCV therapy has become more comfortable. Nevertheless, there are special patient groups, in whom treatment of HCV is still challenging. Due to only few data available, tolerability and efficacy of DAAs in special patient cohorts still remain unclear. Such special patient cohorts comprise HCV in patients with decompensated liver disease (Child-Pugh Class B or C), patients with chronic kidney disease and patients on waiting lists for renal/liver transplantation or those with HCV recurrence after transplantation. HCV infection in transplant recipients has been shown to be associated with increased morbidity and mortality and reduced graft survival. Successful eradication of HCV results in a better outcome concerning liver-related complications and in a better clinical outcome of these patients. In this update, the current therapeutic HCV strategies in patients with GFR < 30 ml/min and in renal transplant recipients will be discussed, but also the role of anti-HCV positive donors.

### Biography

Hartmut H J Schmidt has completed his MD from Medical University of Hannover in Germany. He received Post-doctoral training in Gastroenterology at Medical University of Hannover, NIH (Bethesda), Charité (Berlin) and Universitätsklinikum Münster. Since 2010, he serves as Director of Klinik für Transplantationsmedizin at Universitätsklinikum Münster. He has published more than 125 original articles.

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