DI-029

ANALYSIS OF THE MODIFICATIONS IN ANTIRETROVIRAL TREATMENT

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Purpose

The object of the study is to **describe the reasons of ART** modifications during 2015 and 2016 and to determine whether the treatment of Hepatitis C Virus (HCV) has supposed an influence.

Methods

ART modifications **during 2015 and from January to September 2016** were revised. Baseline treatments, causes of changes in treatment and new schemes were analyzed.

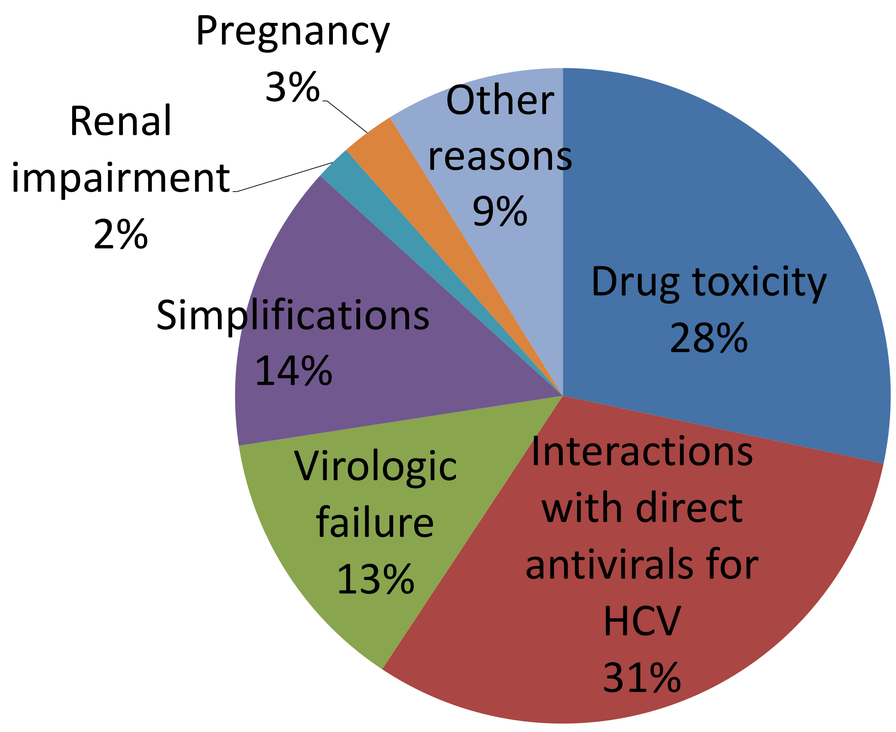
Results

During **2015**, **113** ART modifications were detected. There were 32 changes (28.3%) because of **drug toxicities**; 18 of them (56.3%) were Central Nervous System (CNS) toxicities (insomnia, abnormal dreams, dizziness…) and most of them due to efavirenz. 16 ART changes (14.2%) were **regimen simplifications** and there were another 15 ART modifications (13.3%) due to **virologic failure**. 35 of the changes (31%) were because of **interactions** with prioritized direct antivirals in our hospital for the treatment of HCV.

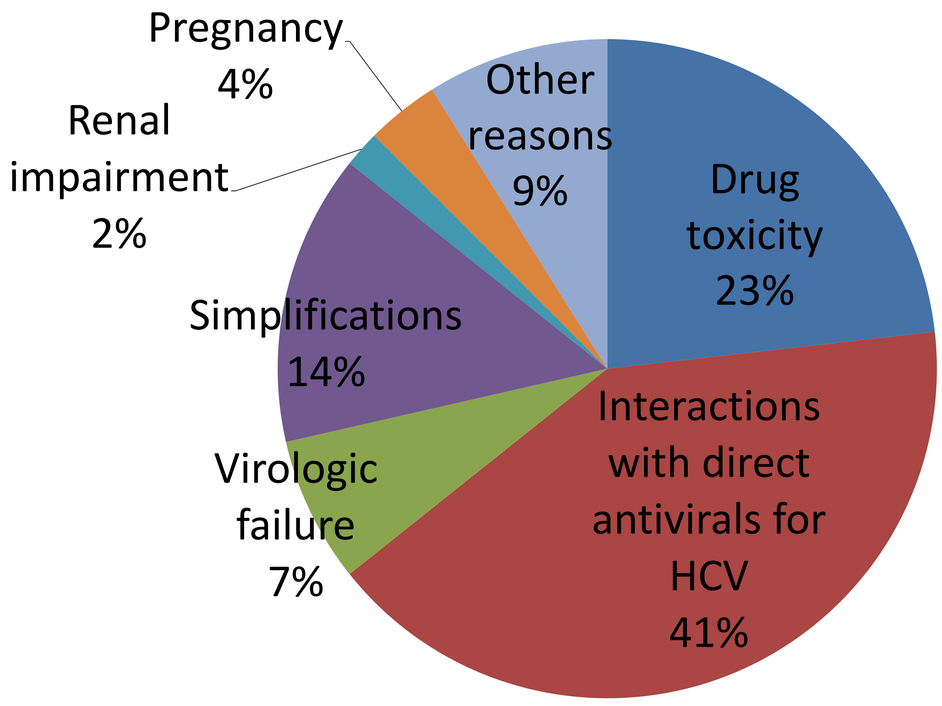
From January to September **2016**, **56** changes were reported. 13 of them (23.2%) were because of a variety of **drug toxicities**, such as lipid abnormalities, CNS toxicity, gastrointestinal intolerance, hypophosphatemia and hyperbilirubinemia, none particularly prevalent. There were 8 **simplifications** of the ART (14.3%) and 4 changes because of **virologic failure** (7.1%). With respect to VHC, 23 changes (41.1%) were necessary owing to **interactions** with direct antivirals for HCV.

In both periods, pregnancy, renal impairment, immunologic failure and other interactions were documented as ART modifying reasons as well.

Modifications in ARV treatment during 2015



Modifications in ARV treatment during 2016



Conclusions

All changes are well documented in the literature. During 2015 Eviplera® (emtricitabine/rilpivirine/tenofovir) was included as an option in our hospital which may be the reason why many patients with intolerance to Atripla® (emtricitabine/efavirenz/tenofovir) or ART combinations including efavirenz were switched to Eviplera®. This implies more changes due to CNS toxicity and overall due to toxicity during 2015, comparing to 2016. Coinfection with HCV is now another reason for ART modification, at least during HCV therapy.