



FOLLOW UP STUDY OF HIV PATIENTS WITH BOOSTED PROTEASE INHIBITOR (PI) MONOTHERAPY IN ROUTINE CLINICAL PRACTICE

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OBJECTIVES

To assess the effectiveness and security of the ritonavir-boosted PI monotherapy and whether the switching has been made in compliance with European AIDS Clinical Society guidelines.

METHODS

A large, retrospective observational, non-interventionist study including 91 patients in ritonavir-boosted PI monotherapy was carried out. Patients were followed since they began with ART to December 2013 (date in which the whole of the patients were switched for at least 6 months). Data were collected and summarized in a table with the following characteristics: Date of HIV diagnose, PI/r monotherapy toxicity, Adherence and Date of starting with PI/r monotherapy, viral load at the moment of the simplification, viral load in December 2013.

RESULTS

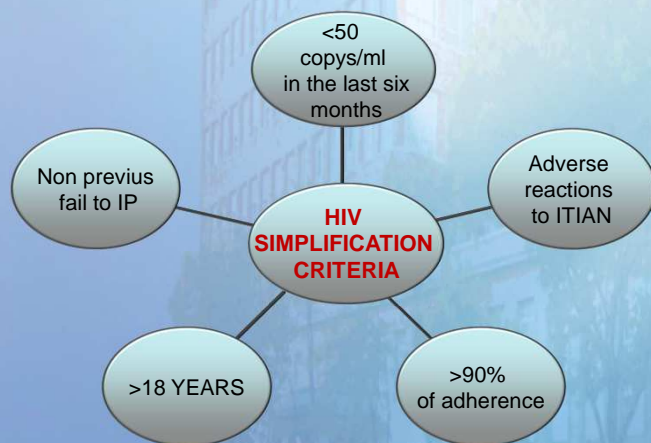
***21** (23%) patients had detectable HIV-RNA at the moment of the simplification thus they did not meet the guidelines recommendations to be switched.

***15** (16%) patients had detectable viral load on December 2013 thus the switching failed in them.

***84** (92%) patients had more than 85% of adherence to the treatment.

***14** (15%) patients had episodes of lipodystrophy.

***4** (4.35%) patients had cardiovascular complications.



CONCLUSIONS

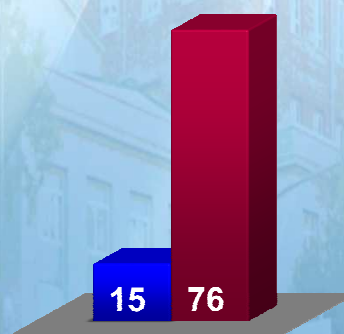
*The overall efficacy of ritonavir-boosted protease inhibitor monotherapy is inferior to ART.

*84% of patients have no viral rebound

*Ritonavir-boosted protease inhibitor (PI) monotherapy reduce adverse reactions and costs, and achieve more adherence.

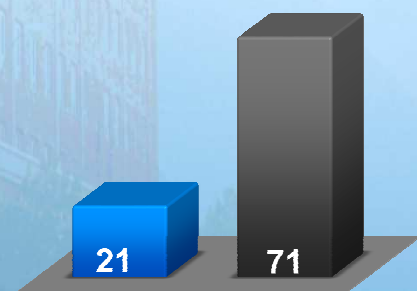
*HIV simplification criterias were accomplished in over three quarters of total.

TREATMENT EFFICACY



■ Patients with detectable viral load
■ Patients with undetectable viral load

INCLUSION CRITERIA



■ Out of inclusion criteria
■ In of inclusion criteria