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REAL-LIFE DATA ON THE EFFECTIVENESS AND SAFETY OF CABOTEGRAVIR/RILPIVIRINE IN A THIRD-LEVEL HOSPITAL

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Background and importance

The combination of cabotegravir/rilpivirine (C/R) is the first commercialised long-acting injectable for treating HIV.

Real life-data in Spain is still very scarce.

Aim and objectives

To analyse the **effectiveness** and **safety** of patients treated with C/R in a tertiary hospital.

Material and methods

Descriptive observational study of patients treated with C/R from 01 February 2023 (date of inclusion in the Hospital Drug Guide) until 31 August 2023 in a tertiary hospital.

All patients on an oral regimen and with an undetectable viral load (VL) were included.

Those that came from the pivotal trials were excluded.

Effectiveness: percentage of patients who remained with undetectable VL on 24 September 2023.

Safety: adverse reactions (AR) recorded in the elecrtronic medical records.

Results

175 patients included

156 men (89%), 18 women (10%) and one transsexual woman (1%), with a median age of 45 years (IQR=36-57).

Prior treatments

48% Bictegravir/emtricitabine/tenofovir alafenamide

23% Dolutegravir/lamivudine

Effectiveness

n=152 | n=23

≥ 1 analysis since the 1st administration | 0 analysis

Only 2 patients had detectable VL in their first analysis (log 1.74 and 1.64).

In both, a new analysis was done at 7 and 29 days, respectively, and again had undetectable VL.

Safety

60.9% adverese reactions

Pain at the administration site (53.0%)
Diarrhoea (2.2%)
Fatigue (1.7%)
Pyrexia (1.7%)
Headache (1.7%)
Induration (0.6%)

Duration: median of 2 days. All of them resolved within 7 days of administration.

2 patients discontinued treatment due to AR:

- Pain at the administration site.
- Weight loss.

Conclusions

The intramuscular association of cabotegravir and rilpivirine effectively maintains VL supressed and it is safe. The most reported adverse reaction is pain at the injection site.