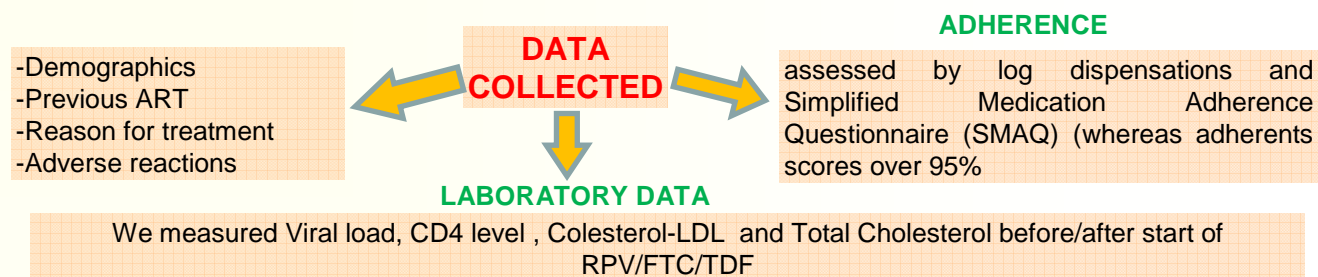


JM. Fernández-Martín, A. Martos-Rosa, JA. Morales-Molina, A. Fayet-Pérez, E. Sánchez-Céspedes, J. Urda-Romacho. APES Hospital de Poniente. El Ejido. Almería. Spain.

Background: Rilpivirine/Emtricitabine/Tenofovir (RPV/FTC/TDF) is a single tablet regimen recommended for naïve HIV patients whom baseline viral load (VL)<100.000 copies/mL¹.

Purpose: Analyze usage profile, effectiveness and safety of RPV/FTC/TDF

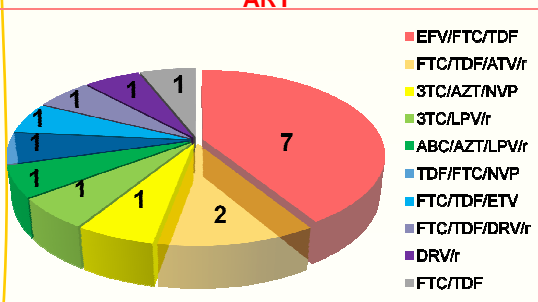
Material and Methods: Retrospective study realized in a Primary Hospital between May 2013-Sept 2014. Patients included: HIV infection who initiated RPV/FTC/TDF.



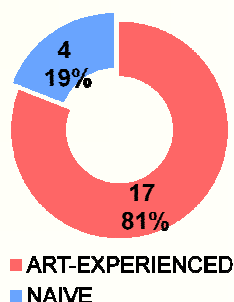
Results:

RPV/FTC/TDF was initiated in 21/390 (5%) patients with ART. Average age (years): 45 (range: 31-70); ♂: 14/21(68%).

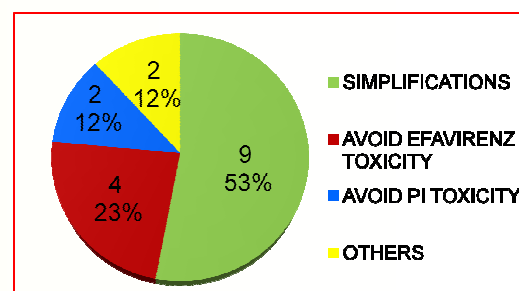
NUMBER OF PATIENTS WITH PREVIOUS ART



REASONS FOR PRESCRIPTION



REASONS FOR ART CHANGE IN PRETREATED PATIENTS



	PRE-TREATMENT	POST-TREATMENT
Adherence >95%	7/17 (41%)	17/21 (80%)
Viral load <50 copies/mL	8/21 (38%)	18/21 (85%)
Pretreatment viral load <50 copies/mL	8/17 (47%)	16/17 (94%)
Patients simplified to RPV/FTC/TDF with adherence >95%	-	6/9 (66%)
Average CD4 count	507	563
Average c-LDL (mg/dL)	114	102
Average Total Cholesterol (mg/dL)	180	164

PATIENTS WITHDRAWN

Two by low adherence and one by pantoprazole interaction

ADVERSE EFFECTS

Only one patient experienced headaches during first week with RPV/FTC/TDF

LIPID PROFILE

Reduction in c-LDL and Total Cholesterol was 10% and 9% respectively, which is consistent with previous studies²

Conclusions: RPV/FTC/TDF was used primarily as a strategy for simplification and to avoid ART toxicity, mainly due to EFV. All patients had undetectable VL, improved adherence (+39%), effectiveness (11% increase CD4) and treatment was well tolerated. Lipid profile was improved too

References: 1. Sharma M. J Antimicrob Chemother. 2013 (68): 250-256 2. Sharma M. J Antimicrob Chemother. 2013 (68): 250-256