

THE EFFECT OF ADDING ANTI-HCV TO ANTIRETROVIRAL TREATMENT ON ADHERENCE

Calvo-Cidoncha E¹, González-Bueno J², Santos –Rubio MD², Sierra Torres MI², Trisancho Pérez Á¹.
¹Pharmacy. Valme Hospital ²Pharmacy. Virgen del Rocío Hospital

Background

The addition of anti-HCV therapy to highly active antiretroviral treatment (HAART) in HIV/HCV coinfecting patients leads to an increase in the treatment complexity which may result in decreased adherence.

Objective

To determine whether the number of adherent patients to HAART decreased after the addition of anti-HCV therapy to HAART.

Material and Methods

❖ **Study design:** prospective two-center observational study

❖ **Inclusion criteria:** HIV/HCV coinfecting patients on HAART who started anti-HCV bi-therapy or triple therapy between January 2011/December 2013 were included.

❖ **Exclusion criteria:** patients who were virologically uncontrolled (>50 copies RNA VIH/mL) or their HAART had been modified in the six months before starting anti-HCV therapy.

❖ **Variables collected:**

- Demographics
- Anti-HCV therapy
- Weeks on anti-HCV therapy
- Adherence. The threshold for optimal adherence was ≥95%

❖ **Statistical analysis:** McNemar's test was applied to compare adherence before and after the addition of anti-HCV therapy to HAART using SPSS-20.

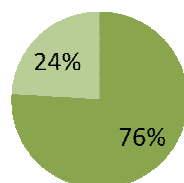
Results

N= 66

Variable		Frequency
Sex (% male)		86
Age (years)		47 (SD: 5)
Length of HCV therapy (weeks)		45.6 (IQR: 20.4-49.1)
Anti-HCV Therapy n (%)	Bi-therapy (peg-interferon+ ribavirin)	53 (80%)
	Triple therapy (Telaprevir)	11 (17%)
	Triple therapy (Boceprevir)	2 (3%)

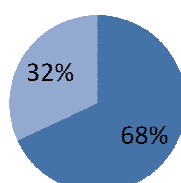
Before starting anti-HCV therapy

■ Adherent to HAART ■ Non-Adherent to HAART



After starting anti-HCV therapy

■ Adherent to HAART ■ Non-Adherent to HAART



Subgroup analysis based on the anti-HCV therapy

Adherent patients on anti-HCV bi-therapy decreased from 42(64%) to 37(56%), p>0.05. The number of adherent patients was not modified in those on anti-HCV triple-therapy.

Conclusion

The introduction of anti-HCV bi-therapy to HAART is associated with a tendency towards a decrease in the number of adherent patients.