

A MULTIDISCIPLINARY APPROACH TO ANTIRETROVIRAL SIMPLIFICATION IN HIV-INFECTED PATIENTS

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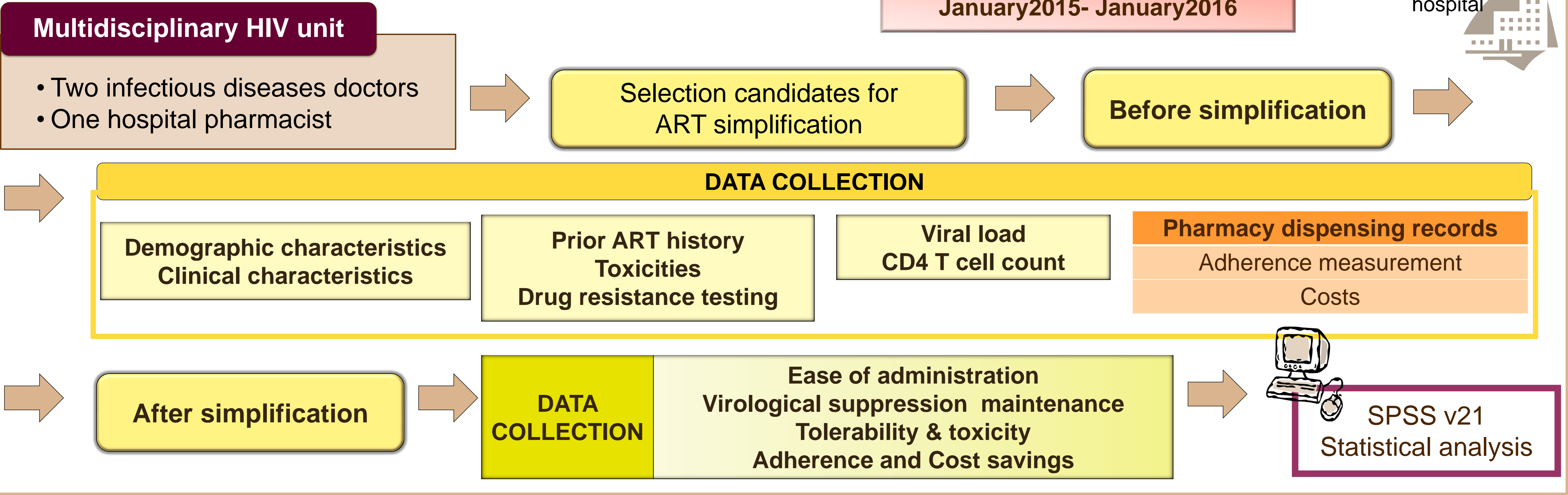
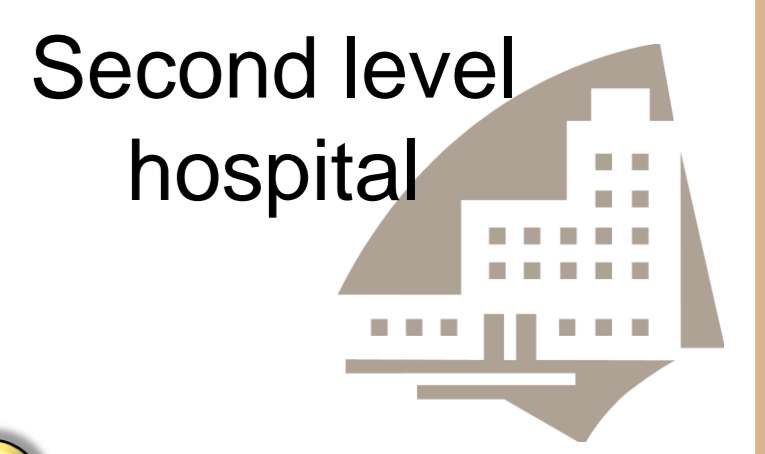
Background: Simplification of antiretroviral treatment (ART) is an option to reduce pill burden, decrease drug toxicities, minimise drug interactions, improve adherence, preserve future treatment options and decrease healthcare costs in the management of treatment experienced HIV infected patients with virological suppression

Purpose To investigate the effects of a multidisciplinary approach to simplify ART in treatment experienced HIV infected patients with virological suppression

Material and Methods

Design: Prospective, descriptive, observational study

January 2015- January 2016



Results

56 ART simplifications in 56 HIV+ patients (15% of patients on ART)

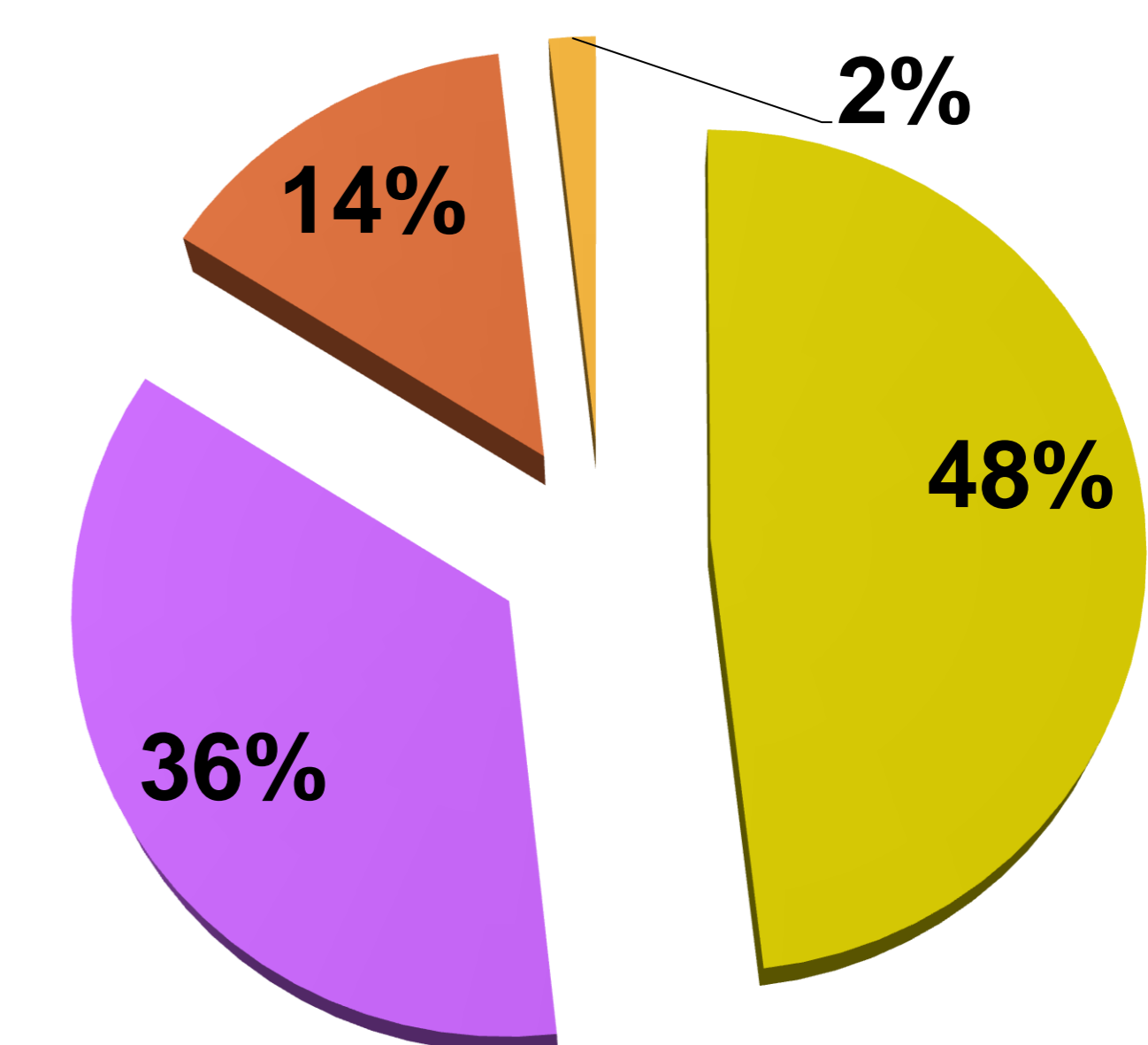
BASELINE CHARACTERISTICS	
Median age (years)	50 (IQR 45-53)
Sex	Men (66%)
CDC stage C	41%
Time since diagnosis	10 years

PILL BURDEN	
Before simplification	3 tablets IQR (3-5)
After simplification	2 tablets IQR (1-3)

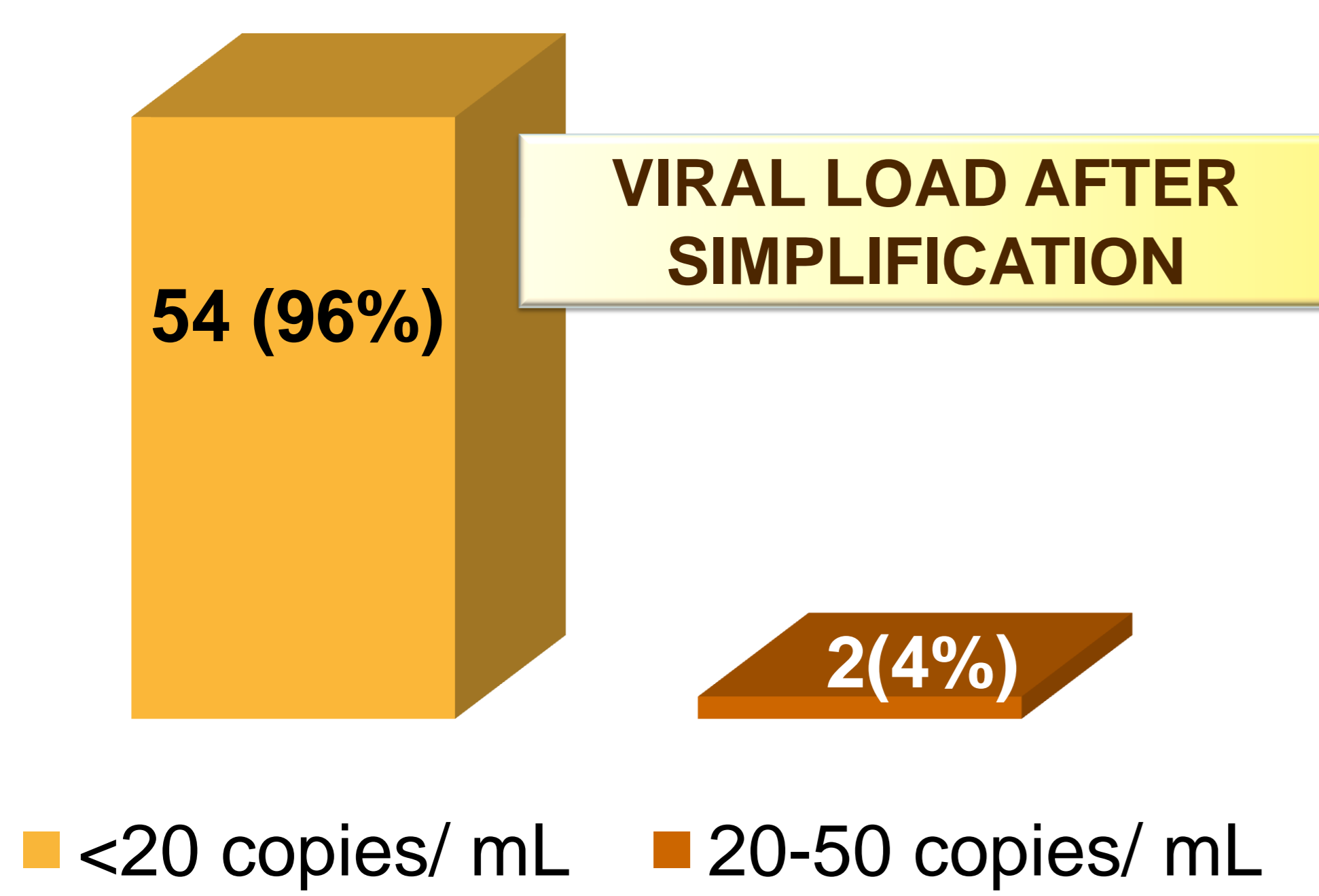
TIME OF FOLLOW-UP (after simplification)	
10,78 ± 3,5 months	

AFTER SIMPLIFICATION	
Adherence	95%
Tolerance	Successful
Adverse effects	Ausent

Simplification scheme



- Reduce drug exposure (number of drugs)
- Change to a dual ART
- Change to a STR
- Change to PI/r monotherapy



COSTS EVALUATION	
Simplification Cost reductions (p<0,05)	€ 10332 monthly € 123984 / year

At the end of the study all viral loads were suppressed
Efficacy of simplification was demonstrated



Conclusions:

A multidisciplinary approach contributed to ART simplification that not only maintained virological suppression and adherence but also saved toxicities, facilitated administration and saved costs in treatment experienced HIV infected patients