CHANGING TREATMENT IN HIV PATIENTS TREATED WITH EFAVIRENZ/EMTRICITABINE/TENOFOVIR TO RILPIVIRINE/EMTRICITABINE/TENOFOVIR.

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BACKGROUND

Rilpivirine is a nonnucleoside reverse transcriptase inhibitor approved to be used in a highly active antiretroviral therapy combination. A single-table regimen of rilpivirine, tenofovir and emtricitabine is commercially available, exactly the same to efavirenz, tenofovir and emtricitabine. There are many articles comparing their effectiveness but not many about their use in routine practice.

PURPOSE

To evaluate the impact, in terms of effectiveness and safety, of the replacement of emtricitabine/tenofovir/efavirenz to emtricitabine/tenofovir/rilpivirine in HIV patients.

MATERIAL AND METHODS

Retrospective observational study in a tertiary hospital.
were included HIV patients who had modified antiretroviral therapy based on emtricitabine/tenofovir/efavirenz combination to emtricitabine/tenofovir/rilpivirine between February to April 2013.

Data were obtained from medical records and from the outpatient dispensing module of ATHOS-APD Pharmacy Service software.

Variables

- Demographic
- HIV viral load
- Count CD4
- CD4 percentage
- Lipid profile

Were measured twice: at the moment of change and 24 weeks after it.
Undetectable viral load was defined as two consecutive determinations of viral load lower than 20 HIV copies/mL.

RESULTS

20 patients(3 women)
Mean age = 47 years old

The results of laboratory variables at baseline and 24 weeks of change were:

VARIABLES	CHANGE	24 WEEKS POST-CHANGE
Undetectable viral load	18 Patients (90%)	19 Patients (95%)
CD4 lymphocytes count(cells/uL)	652	675
Percentage of CD4 lymphocytes	35%	37%
Cholesterol(mg/dL)	195	175
Triglyceride level(mg/dL)	126	116

CONCLUSIONS

Our results suggest that emtricitabine/tenofovir/efavirenz and emtricitabine/tenofovir/rilpivirine can be exchanged without affecting the effectiveness and safety of antiretroviral therapy. This strategy could be useful in the future to provide a therapy based on efficiency criteria

References:
Molina-JM.Rilpivirine vs. efavirenz HIV-1 in patients with baseline viral load 100.000copies/ml or less:week 48 phase III analysis

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