Clinical outcomes of patients switched to darunavir/ cobicistat from boosted ritonavir based antiretroviral therapy

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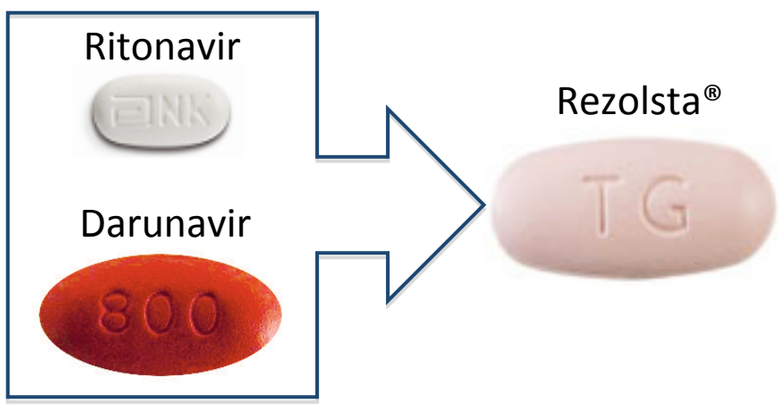
Background

- A fixed dose combination pill containing darunavir and cobicistat marketed as Rezolsta® was approved for use in Welsh HIV clinics in August 2015.
- For patients taking protease inhibitors boosted with ritonavir, switch offers reduction in pill burden and for healthcare providers treatment costs are lower.
- Patients and providers may be concerned about safety, tolerability and impact on measurement of renal function.



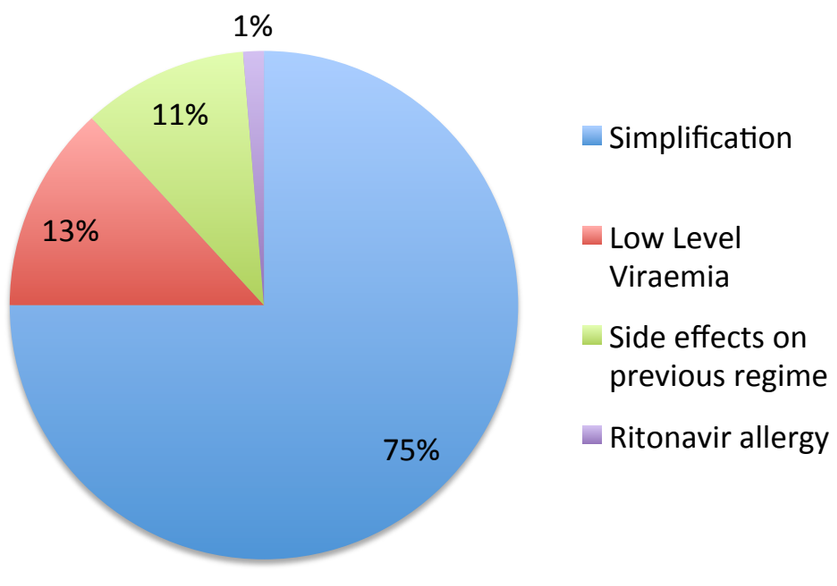
Methods

- Patients started on Rezolsta® between 4 March 2015 and 24 November 2016 were identified from pharmacy records and the case notes reviewed.
- Data was collected on demographics, baseline characteristics, antiretroviral and other drug history and indications for switch.
- Data was also collected on clinical parameters after switch along with renal function and patient reported side effects.

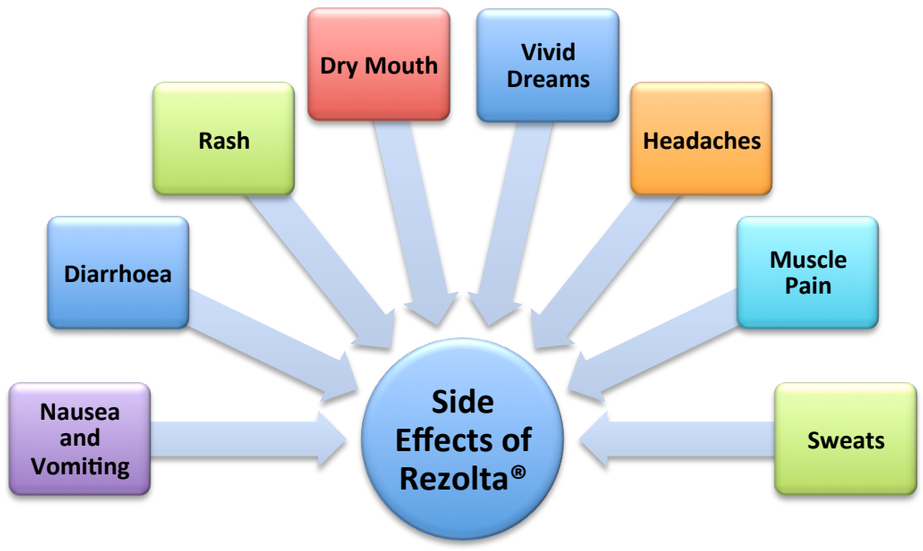
Results

- 77 notes were identified as eligible for inclusion.
- 54 patients were male (70%)
- Median age was 44 years.
- 2 patients (3%) had documented archived resistance.
- 56 patients (73%) had a tenofovir-based backbone.

Reasons for Switch to Rezolsta®



- Loss of virological control occurred in 1 patient.
- 17 patients had an improvement in their eGFR by an average of 6 mL/ min. 18 patients had a decline in their eGFR of an average of 9 mL/ min at first blood test.



- Most side effects had gone by 2-4 weeks.
- 7 patients (9%) stopped taking Rezolsta due to nausea, size of tablet, muscle pain, hepatitis C interactions, personal preference for alternative regimen and poor memory/concentration.

Conclusion

- We observed most patients tolerated the switch without long term side effects
- Of the switch patients, 5 returned to their previous regimen and 2 switched to another regimen, although this seems a minority.
- The minimal changes in eGFR seen in this patient cohort leads clinicians to have a low threshold of concern for monitoring renal function.
- This data supports the benefits of a simplified regimen such as Rezolsta®, and also may offer a safe and financially viable option for healthcare providers.

Summary

- Rezolsta® has added another HIV treatment which may reduce pill burden and be financially advantageous to providers.
- Patients have tolerated the switch with transient change in side effects and good virological control.
- Minimal eGFR changes in practice give reassurance for renal monitoring

"Less tablets to take with no change in side effects"
Quote from patient