

The Global REGAL Cohort: A Retrospective Real-world Study of the Effectiveness and Tolerability of the Antiretroviral Treatment Regimens DTG/3TC Compared to BIC/FTC/TAF in Older Persons Living With HIV

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Background

With advancements in antiretroviral therapy (ART), people living with HIV are enjoying longer lives. However, as they age, they often face additional health challenges that require multiple medications, leading to potential drug interactions. Traditionally, ART regimens included 3 drugs, but now 2-drug regimens are being introduced. This study focuses on 2 regimens: dolutegravir/lamivudine (DTG/3TC), a 2-drug regimen, and bicitgravir/emtricitabine/tenofovir alafenamide (BIC/FTC/TAF), a 3-drug regimen.

What treatment was studied here?

The study looked at 2 antiretroviral regimens: DTG/3TC, a 2-drug regimen, and BIC/FTC/TAF, a 3-drug regimen. DTG/3TC is recommended for both starting treatment and switching for those with previous ART experience. BIC/FTC/TAF is another widely used regimen. Both aim to keep the virus suppressed.

What was the purpose of this study?

The study aimed to compare how effective and tolerable it is to switch to DTG/3TC versus BIC/FTC/TAF in people with HIV aged 50 and older. It focused on maintaining viral suppression and managing other health conditions and medications, which are common in older populations.

Who took part in the study and how was the treatment studied?

The study involved 1144 participants aged 50 and older, who had previous ART experience and had achieved viral suppression before switching to either DTG/3TC or BIC/FTC/TAF. Participants were from 7 countries: China, France, Germany, Korea, Spain, Taiwan, and the United States. There were 593 people on DTG/3TC and 551 on BIC/FTC/TAF, with follow-up for at least 24 weeks. The average age was around 60, and many had multiple health conditions and were taking non-ART medications.

What are the research findings?

The study found that both DTG/3TC and BIC/FTC/TAF were effective in maintaining viral suppression, with only 2 cases of viral failure reported, 1 in each group. The rate of viral failure was very low, with no resistance development, showing strong control over the virus. Both regimens were similarly well-tolerated, with minimal changes or discontinuations observed in 2.4% of the DTG/3TC group and 4.2% of the BIC/FTC/TAF group. The study also noted stable immune function and liver health.

What does this mean for people with HIV?

For people living with HIV, especially those aged 50 and older, the findings suggest that switching to a 2-drug regimen like DTG/3TC can effectively maintain viral suppression with fewer medications. This can help reduce drug interactions and simplify treatment, which is beneficial for managing multiple health conditions and medications. This approach may be particularly helpful for older individuals who often face complex health needs and require careful management of their treatment plans.

Conclusions

The study concluded that both DTG/3TC and BIC/FTC/TAF are effective and well-tolerated options for older people with HIV. Using a 2-drug regimen such as DTG/3TC provides high effectiveness in older adults while using fewer medications than 3-drug regimens.

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