

The US 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

Onyema Ogbuagu,¹ Jeremy Fraysse,² Jennifer Kuretski,³ Gustavo Verdier,⁴ Cindy Firnhaber,^{5,6} Emilio Letang,⁷ Tanya Schreiber,⁸ Cassidy Henegar,⁹ Rebecca Glassman,¹⁰ Deanna Merrill,⁹ Carly Rodriguez,¹¹ Richard Grove,¹² Paula Peressini López,¹³ Bryn Jones,¹⁴ Julie Priest⁹

¹Section of Infectious Diseases, Yale School of Medicine, New Haven, CT, USA; ²ViiV Healthcare, San Francisco, CA, USA; ³Midway Specialty Care Center, West Palm Beach, FL, USA; ⁴ViiV Healthcare, Montreal, Canada; ⁵Vivent Health, Denver, CO, USA; ⁶University of Colorado Anschutz Medical Center, Denver, CO, USA; ⁷ViiV Healthcare, Barcelona, Spain; ⁸CAN Community Health, Sarasota, FL, USA; ⁹ViiV Healthcare, Durham, NC, USA; ¹⁰Department of General Medicine, Westchester Medical Center, New York Medical College, Valhalla, NY, USA; ¹¹IQVIA, Real World Solutions, Durham, NC, USA; ¹²GSK, London, United Kingdom; ¹³IQVIA, Barcelona, Spain; ¹⁴ViiV Healthcare, London, United Kingdom

Background

In recent years, there have been significant improvements in antiretroviral therapy (ART). Traditionally, ART used 3-drug combinations, but now there are 2-drug options like dolutegravir/lamivudine (DTG/3TC). However, there's not much real-world data comparing these 2-drug treatments to the traditional 3-drug ones, particularly for older adults who might have other health issues.

What treatment was studied here?

This study looked at 2 antiretroviral treatments: DTG/3TC, which uses 2 drugs, and bictegravir/emtricitabine/tenofovir alafenamide (BIC/FTC/TAF), which uses 3 drugs. Both aim to maintain viral suppression.

What was the purpose of this study?

The study aimed to compare how well 2 different antiretroviral treatments work for older people with HIV and to describe their characteristics, such as other conditions they had and how many other medications they used. It focused on switching to either DTG/3TC or BIC/FTC/TAF. The study evaluated how these treatments maintained viral suppression, managed side effects, and met the diverse health needs of older adults with HIV.

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

The study included 326 participants aged 50 and older who were already on ART and had their HIV levels under control. They were split into 2 groups: 165 switched to the 2-drug treatment DTG/3TC, and 161 switched to the 3-drug treatment BIC/FTC/TAF. Conducted at 5 sites across the U.S., the study followed participants for up to 288 weeks. Participants had lived with HIV for a median of 18.5 years in the DTG/3TC group and 21.8 years in the BIC/FTC/TAF group, with many having other health conditions requiring additional medications.

What are the research findings?

The study showed that both treatments were equally effective in maintaining viral suppression in older adults. Only 2 cases of increased HIV levels requiring a treatment change occurred, 1 in each group, showing high effectiveness, with no resistance reported. The rate of increased HIV levels was 0.26 per 100 person-years for the DTG/3TC group and 0.23 per 100 person-years for the BIC/FTC/TAF group, with no significant differences between them. Both treatments were well tolerated, with few changes or discontinuations, even with multiple health conditions and other medications.

What does this mean for people with HIV?

For older people with HIV, this study indicates that switching to a 2-drug treatment like DTG/3TC can be as effective as staying on a 3-drug treatment. This might mean fewer medications without reducing the effectiveness of HIV treatment.

Conclusions

The study concluded that DTG/3TC is a good treatment option for older people with HIV, offering similar effectiveness and tolerability as the 3-drug treatment BIC/FTC/TAF. Both treatments successfully maintained long-term viral suppression, with no resistance, supporting the option for an effective treatment with fewer drugs in this group.

Disclaimer

This content was acquired following an unsolicited medical information enquiry by a healthcare professional. Always consult the product information for your country, before prescribing a ViiV medicine. ViiV does not recommend the use of our medicines outside the terms of their license. In some cases, the scientific Information requested and downloaded may relate to the use of our medicine(s) outside of their license.