Switch from PI-Based Regimen to EVG-COBI-TDF-FTC

Study 115 (STRATEGY-PI)
Switch from PI-Based Regimen to EVG-COBI-TDF-FTC

STRATEGY-PI: Design

- **Background**: Open-label, randomized, phase 3b trial comparing switch to elvitegravir-cobicistat-tenofovir DF-emtricitabine versus continuation of baseline regimen of ritonavir + PI + tenofovir DF-emtricitabine

- **Inclusion Criteria** (n = 433)
  - HIV RNA <50 copies/mL on ART for ≥6 months
  - Baseline regimen of RTV + PI + TDF-FTC
  - No prior virologic failure
  - No resistance to TDF or FTC
  - CrCl ≥70 mL/min

- **Treatment Arms**
  - EVG-COBI-TDF-FTC (Switch group)
  - Remain on RTV + PI + TDF-FTC (No switch group)

*NOTE: 3 participants from switch group and 1 from no switch group were excluded from study after screening for protocol violations.*

Switch from PI-Based Regimen to EVG-COBI-TDF-FTC STRATEGY-PI: Result

Week 48 Virologic Response

Switch from PI-Based Regimen to EVG-COBI-TDF-FTC
STRATEGY-PI: Study Conclusions

**Interpretation:** “Coformulated elvitegravir, cobicistat, emtricitabine, and tenofovir might be a useful regimen simplification option for virologically suppressed adults with HIV taking a multi-tablet ritonavir-boosted protease inhibitor regimen.”

The **National HIV Curriculum** is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling $1,021,448 with 0% financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit HRSA.gov. This project is led by the University of Washington’s Infectious Diseases Education and Assessment (IDEA) Program.