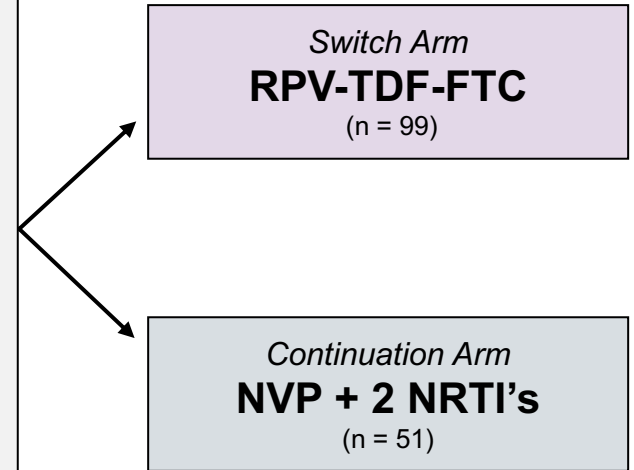


Switch RPV-TDF-FTC from NVP-Based Regimen

Near-Rwanda Trial

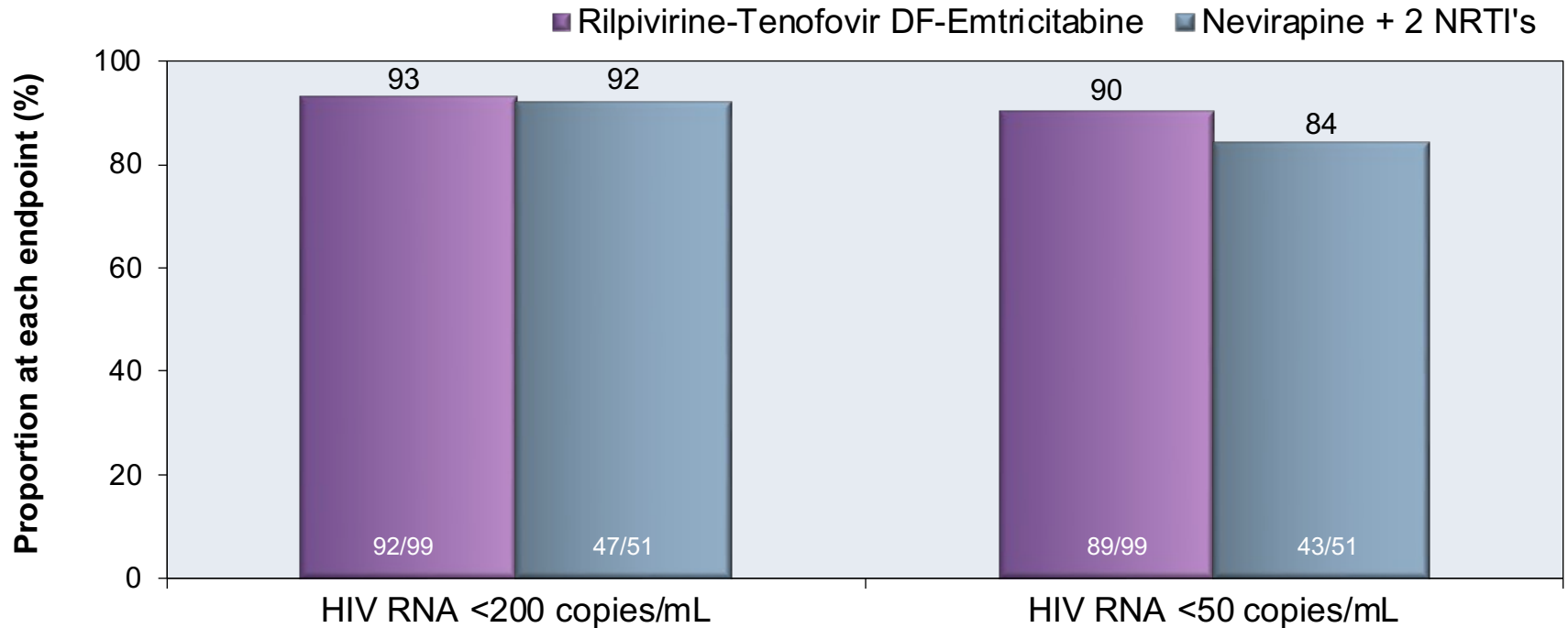
Switch to RPV-TDF-FTC from NVP-Based Regimen Near-Rwanda: Study Design

- **Background:** Randomized, open-label, single-center, noninferiority study conducted in Rwanda to evaluate a switch from a nevirapine (NVP)-based regimen to a single tablet regimen of rilpivirine-tenofovir DF-emtricitabine (RPV-TDF-FTC)
- **Inclusion Criteria (n = 150 enrolled)**
 - Rwandan adults with HIV-1 infection
 - HIV RNA <50 copies/mL within 12 months of screening
 - HIV RNA <50 copies/mL at screening visit
 - On NVP + lamivudine + 2nd NRTI ≥12 months
 - No prior virologic failure
 - No prior ART change except NRTI substitution
 - eGFR >60 mL/min and Hemoglobin >8 g/dL
 - No active TB or pregnancy
- **Treatment Arms (2:1 randomization)**
 - Continue NVP + 2 NRTIs
 - Switch to RPV-FTC-TDF



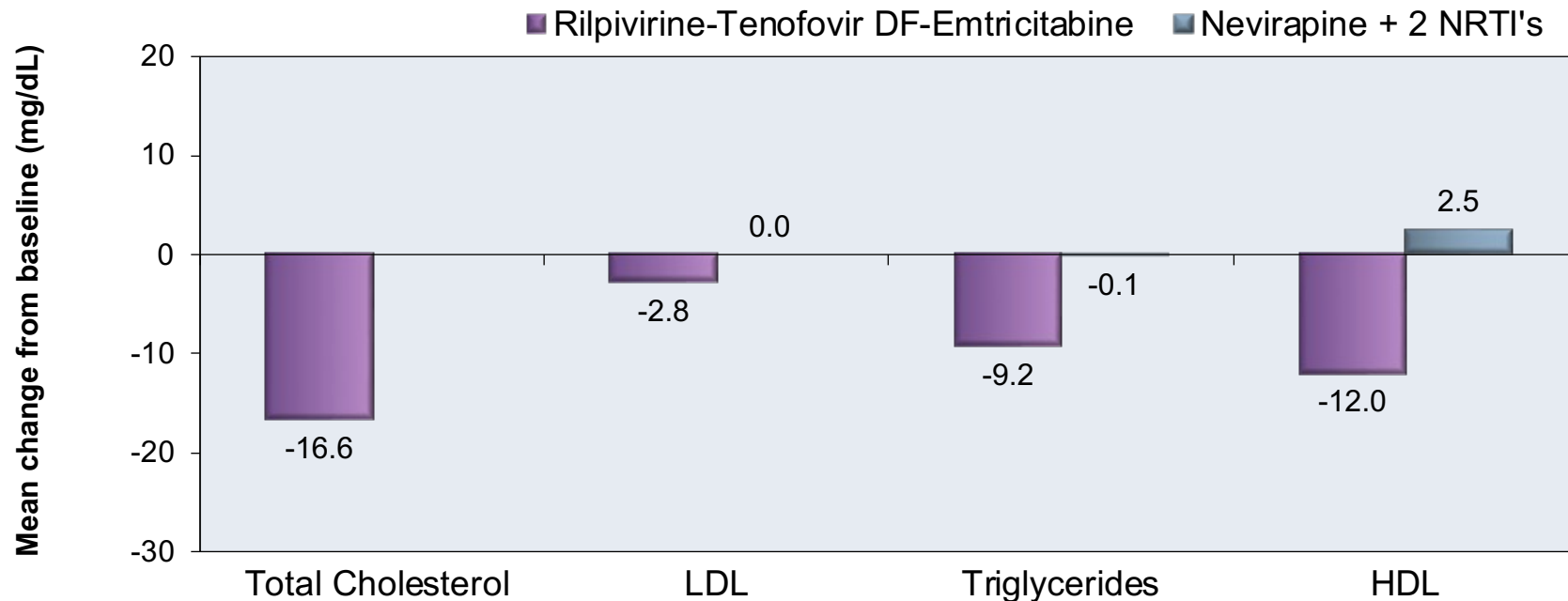
Switch to RPV-TDF-FTC from NVP-Based Regimen Near-Rwanda: Results

24 Week Virologic Response (FDA Snapshot Analysis)



Switch to RPV-TDF-FTC from NVP-Based Regimen Near-Rwanda: Results

Week 24: Change in Plasma Lipids from Baseline



Switch to RPV-TDF-FTC from NVP-Based Regimen Near-Rwanda: Conclusions

Conclusions: “A switch from nevirapine-based ART to rilpivirine-emtricitabine-tenofovir disoproxil fumarate had similar virologic efficacy to continued nevirapine-based antiretroviral therapy after 24 weeks with few adverse events.”

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