

Switch from Enfuvirtide to Raltegravir with Multidrug-Resistant HIV

EASIER ANRS 138 Trial

Switch from Enfuvirtide to Raltegravir in Multidrug-Resistant HIV

EASIER ANRS 138: Study Design

Study Design: EASIER ANRS 138

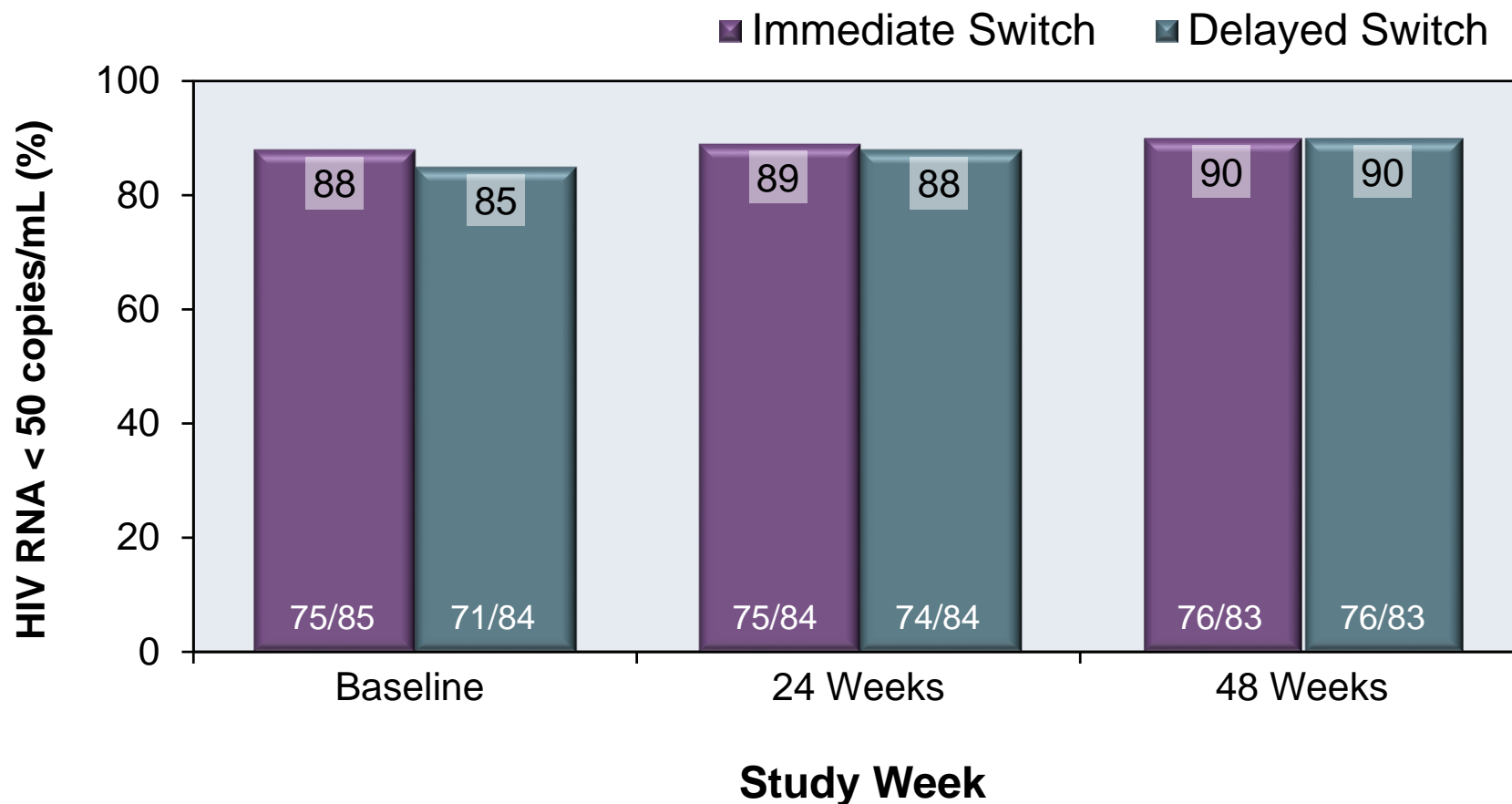
- **Background:** Open label, randomized trial evaluating switching from enfuvirtide-based therapy to raltegravir-based therapy, in virologically suppressed patients with multidrug resistant HIV-1 infection.
- **Inclusion Criteria (n = 170)**
 - Age ≥ 18 years
 - HIV RNA < 400 copies/mL for > 3 months
 - History of triple class failure (PI, NRTI, NNRTI)
 - Integrase inhibitor naïve
- **Treatment Arms**
 - Raltegravir 400 mg BID + background regimen
 - Enfuvirtide + background regimen x 24 weeks, then switch enfuvirtide to raltegravir 400 mg BID

Immediate Switch Arm
**Raltegravir 400 mg BID
+ Background Regimen**
(n = 84)

Delayed Switch Arm
**Enfuvirtide x 24 weeks, then
Raltegravir 400 mg BID +
Background Regimen**
(n = 84)

Switch from Enfuvirtide to Raltegravir in Multidrug-Resistant HIV EASIER ANRS 138: Results

Virologic Response (Intent-to-Treat Analysis, censoring missing data)

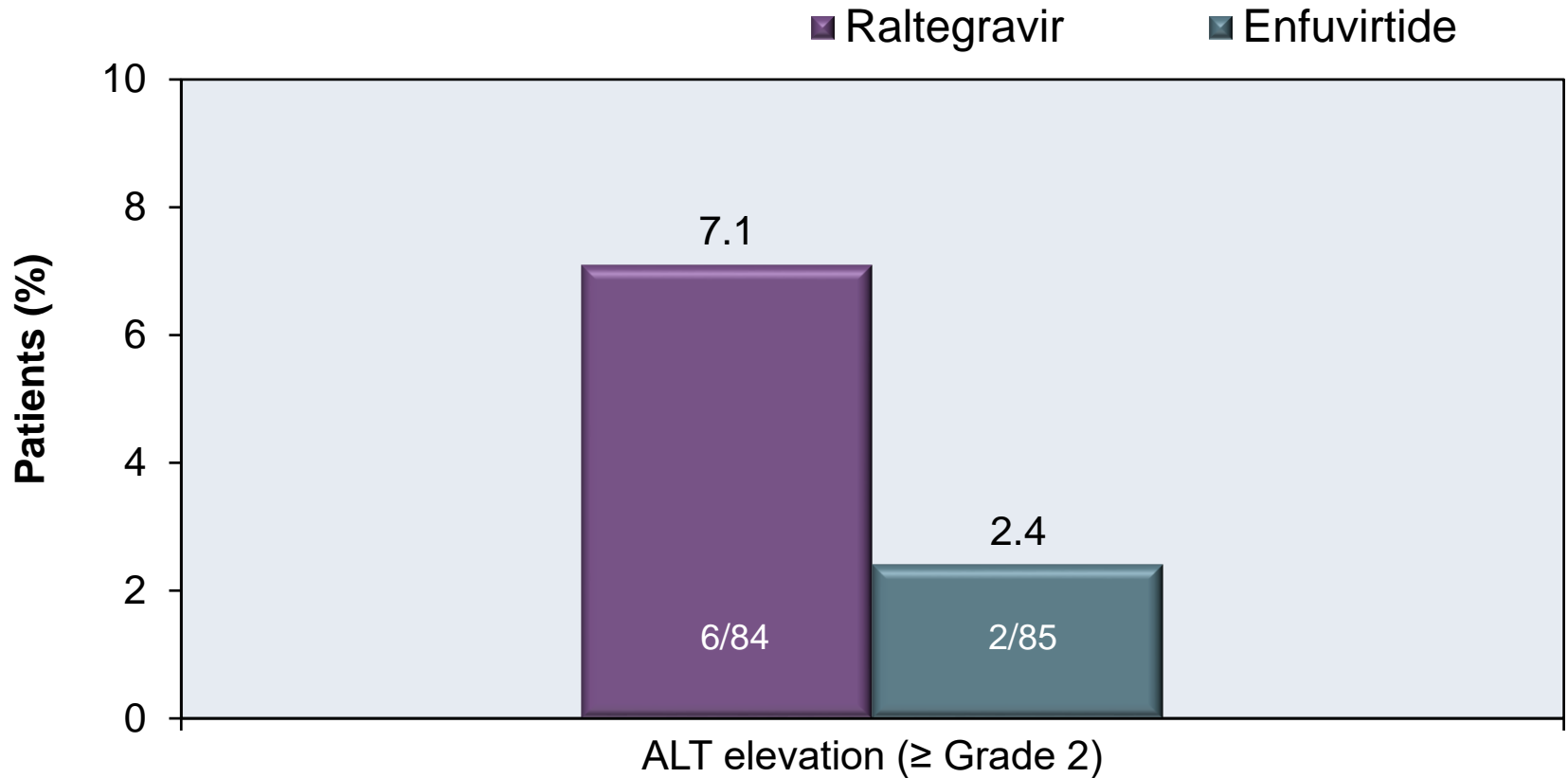


Switch from Enfuvirtide to Raltegravir in Multidrug-Resistant HIV EASIER ANRS 138: Conclusions

Conclusions: “In well-suppressed patients with multidrug-resistant HIV infection, a switch from enfuvirtide to raltegravir is generally well tolerated and has sustained antiviral efficacy when combined with a potent background regimen.”

Switch from Enfuvirtide to Raltegravir in Multidrug-Resistant HIV EASIER ANRS 138: Incidence of ALT Elevations

Week 24: ALT Elevation



Source: de Castro N, et al. AIDS Res Ther. 2016;13:17.

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EASIER ANRS 138: Risk Factors for ALT Elevation

Multivariate Analysis of Baseline Risk Factors for ALT Elevation (\geq Grade 2)		
RISK FACTORS	Odds Ratio	p value
Use of boosted tipranavir	3.66	0.022
ALT elevation (\geq Grade 1)	10.3	< 0.001
Alcohol use (> 2 times/week)	0.39	0.281
Liver disease (steatosis/cirrhosis)	0.89	0.899

Acknowledgment

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