

Switch to Etravirine from Efavirenz due to CNS Toxicity

SSAT-029 STUDY

Switch to Etravirine from Efavirenz Due to CNS Toxicity

SSAT-029: Design

Study Design: SSAT-029

- **Background:** Randomized, double-blind, phase IV trial evaluating the impact of switching from etravirine to efavirenz on central nervous system (CNS) symptoms on a stable, fully suppressive efavirenz-based regimen
- **Inclusion Criteria (n = 38)**
 - On efavirenz plus 2NRTIs >12 weeks
 - Ongoing CNS symptoms
 - HIV RNA <50 copies/mL
 - CD4 count >50 cells/mm³
 - No previous exposure to etravirine or rilpivirine
- **Treatment Arms**
 - ETR + EFV-placebo + 2NRTI x 12 weeks, then open-label ETR + 2NRTIs
 - EFV + ETR-placebo + 2NRTI x 12 weeks, then switch to open-label ETR + 2NRTIs

Immediate Switch Arm

Etravirine + 2NRTI

(n = 20)

Delayed Switch Arm

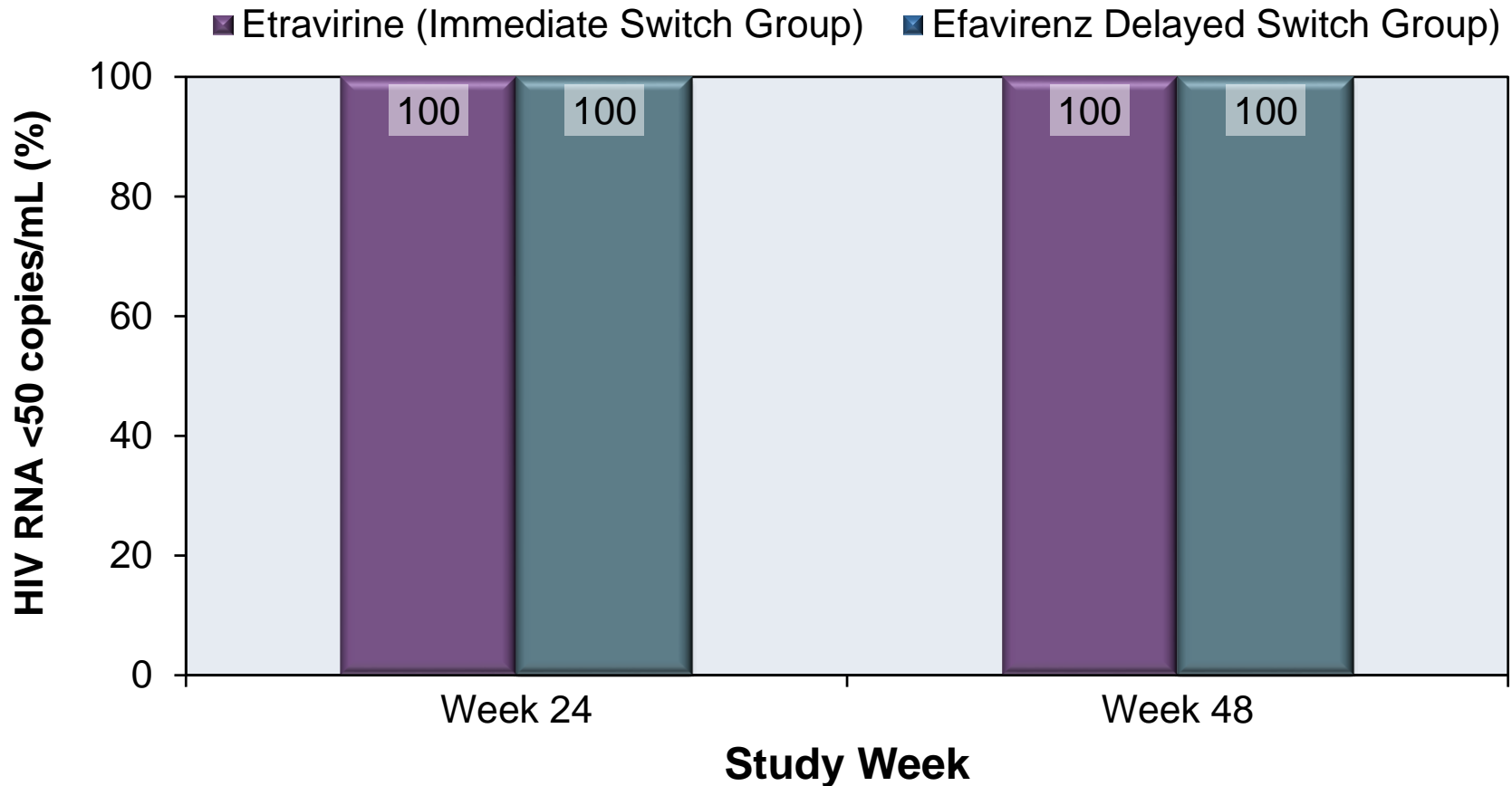
**Efavirenz + 2NRTIs x 12 weeks,
then Etravirine + 2NRTIs**

(n = 18)

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SSAT-029: Result

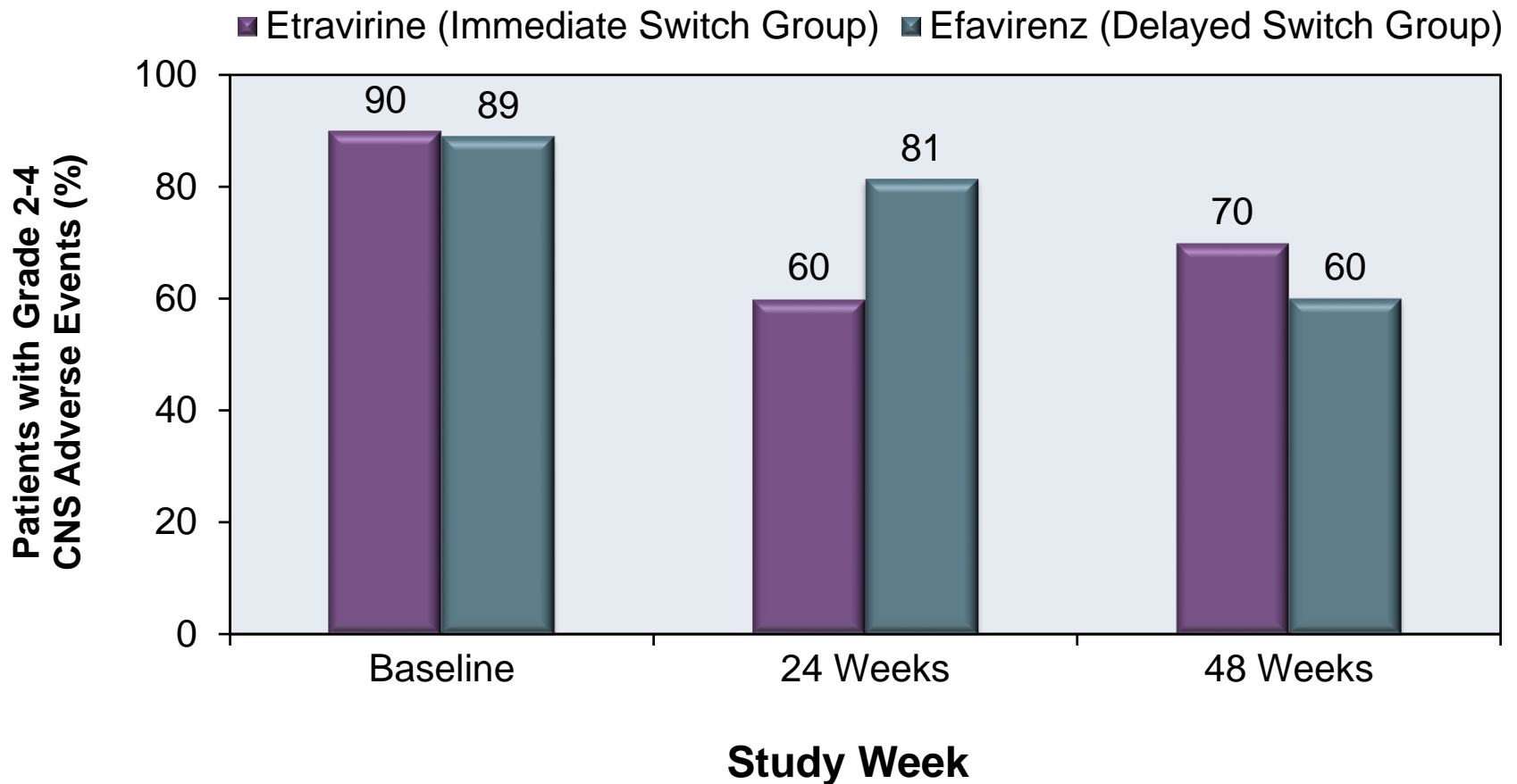
Week 24 and 48: Virologic Response (on-treatment analysis)



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SSAT-029: Result

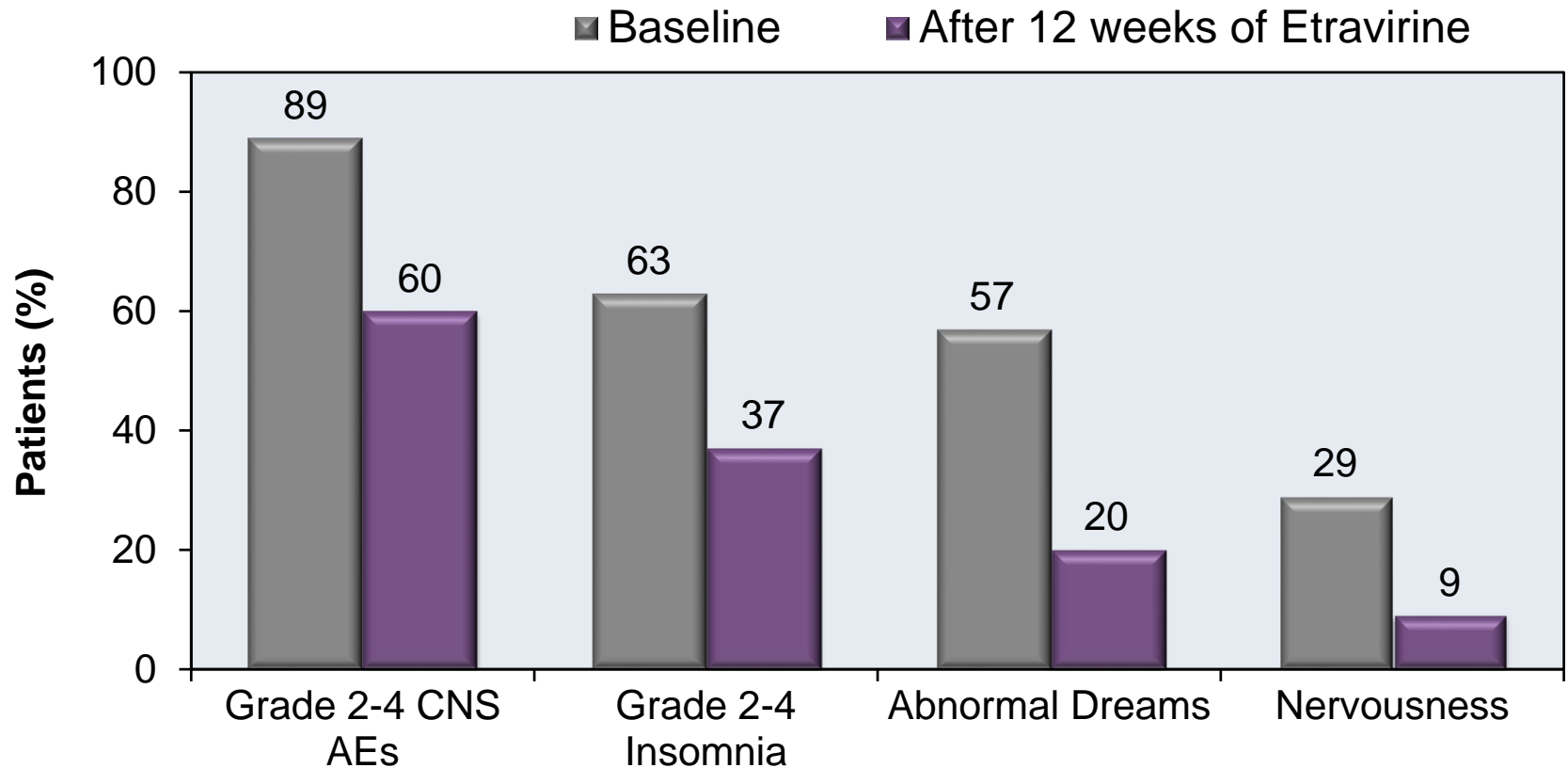
Change in CNS Adverse Events, by Study Group



Switch to Etravirine from Efavirenz Due to CNS Toxicity

SSAT-029: Result

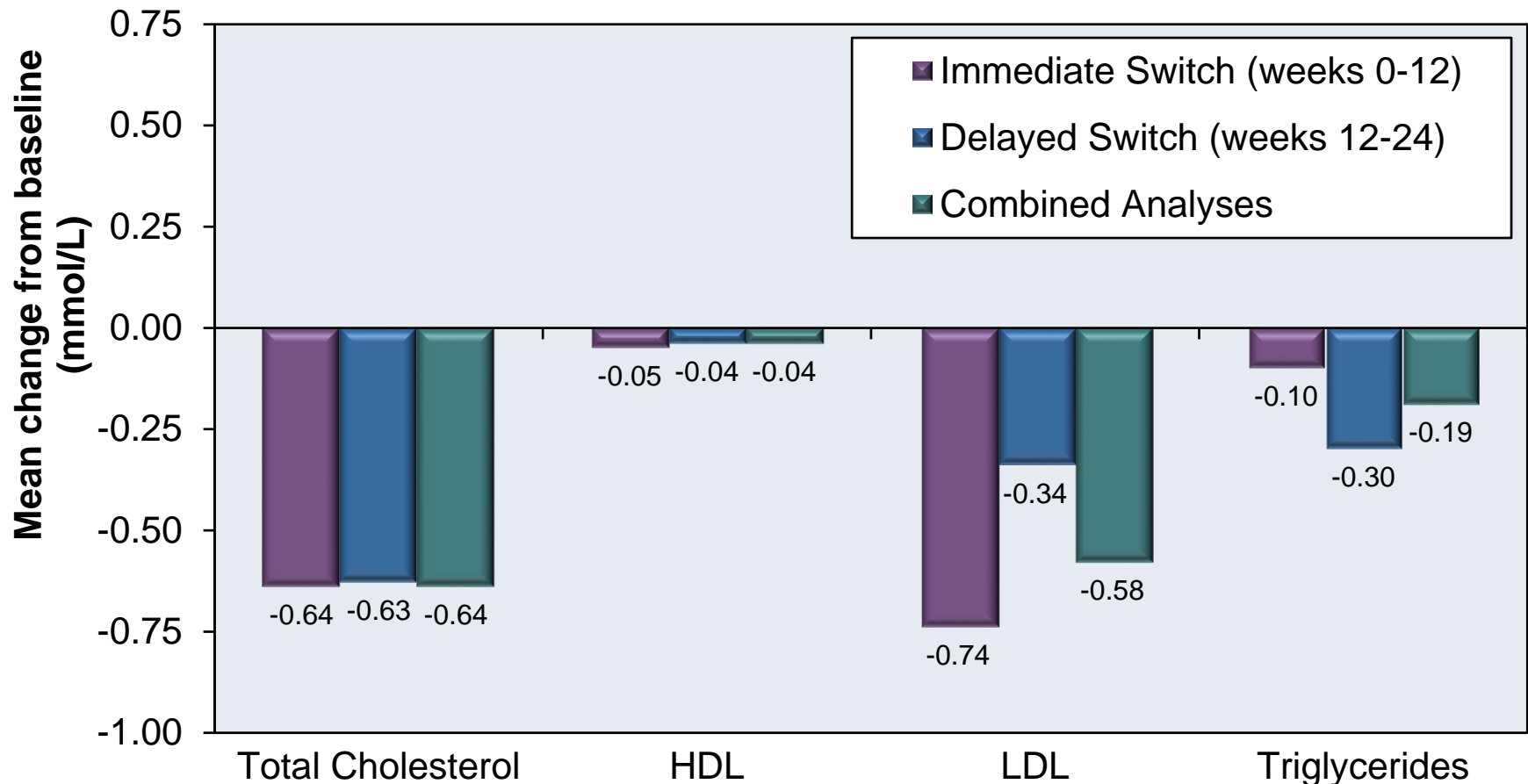
Change in CNS Adverse Events: Combined Analyses



Switch to Etravirine from Efavirenz Due to CNS Toxicity

SSAT-029: Result

Lipid Changes After 12 Weeks of Etravirine



Switch from Efavirenz to Etravirine

SSAT-029: Conclusions

Conclusion: “Switching efavirenz to etravirine led to a significant reduction in overall grade 2-4 CNS adverse events, including insomnia, abnormal dreams and nervousness as individual adverse event. Lack of improvement for some events suggests other causative factors.”

Acknowledgment

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