Lopinavir-RTV + TDF-FTC versus Maraviroc + TDF-FTC for PEP MARAVI-PEP Trial



Lopinavir-RTV + TDF-FTC versus Maraviroc + TDF-FTC for PEP MARAVI-PEP: Study Design

Study Design: MARAVI-PEP

- Background: Prospective, randomized, open-label, phase 4 trial comparing lopinavir-ritonavir versus maraviroc, both with tenofovir-emtricitabine, for HIV postexposure prophylaxis (PEP)
- Inclusion Criteria (n=237)*
 - Age ≥18
 - Residents of Barcelona
 - Presented to ER due to potential HIV sexual exposure
 - Met criteria for PEP per Spanish guidelines
- Treatment Arms
 - Lopinavir-ritonavir 400-100 mg BID + TDF-FTC
 - Maraviroc 300 mg BID + TDF-FTC

Lopinavir-RTV + TDF-FTC (n = 117)

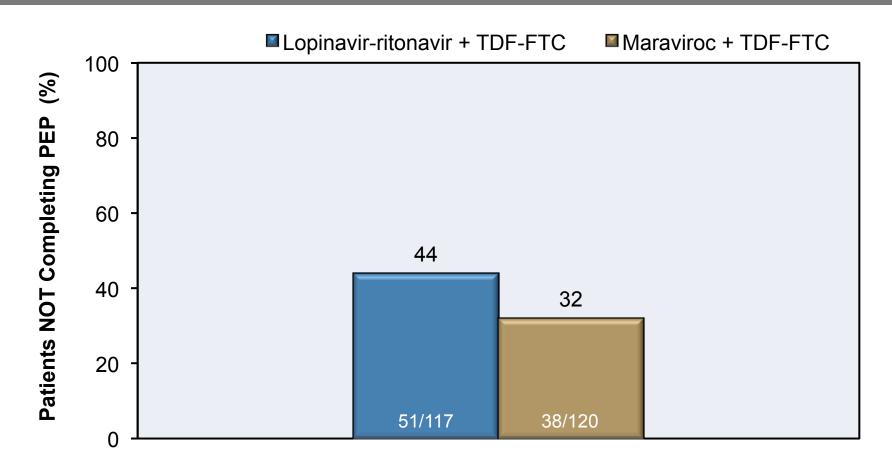
Maraviroc + TDF-FTC (n =120)

*Only 187 individuals who were randomized attended first scheduled visit



Lopinavir-RTV + TDF-FTC versus Maraviroc + TDF-FTC for PEP MARAVI-PEP: Result

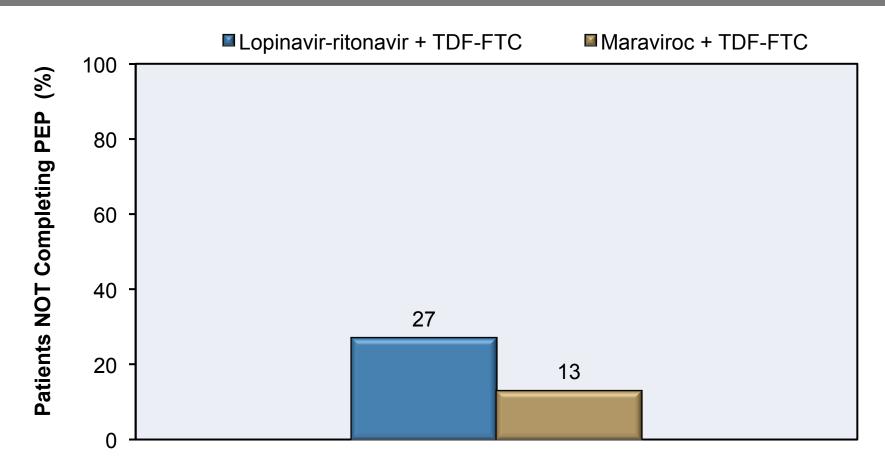
Day 28: PEP Non-completion





Lopinavir-RTV + TDF-FTC versus Maraviroc + TDF-FTC for PEP MARAVI-PEP: Result (subgroup analysis)

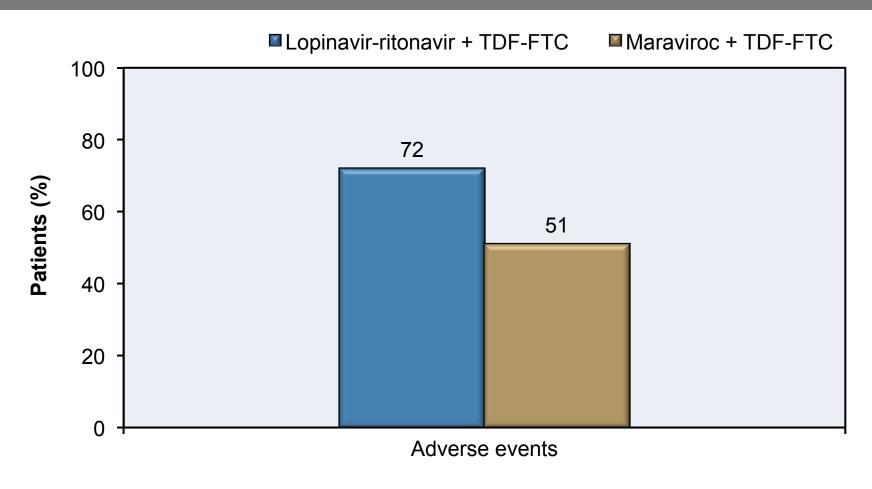
Day 28: PEP Non-completion (for patients attending day 1 visit – ITT)





Lopinavir-RTV + TDF-FTC versus Maraviroc + TDF-FTC for PEP MARAVI-PEP: Result

Adverse Events (reported by patients attending day 1 visit)





Lopinavir-RTV + TDF-FTC versus Maraviroc + TDF-FTC for PEP MARAVI-PEP: Result

Factors Associated with PEP Non-completion at Day 28 (univariate analysis)

Characteristic	PEP discontinuations due to any cause in entire cohort, OR (95% CI) (n = 237)	PEP discontinuations due to any cause in patients attending day 1 visit, OR (95% CI) (n = 182)
Randomization arm: Lopinavir-RTV	1.3	2.9
Race: non-Caucasian	2.1	2.2
Risk assessment: low	1.2	4.8
Previous PEP: yes	2.4	1.6
Presence of adverse events due to PEP*	N/A	0.3

^{*}Only measured in patients who attended day 1 visit



Lopinavir-RTV + TDF-FTC versus Maraviroc + TDF-FTC for PEP MARAVI-PEP: Conclusions

Conclusions: "PEP non-completion and adverse events were both significantly higher in patients allocated to ritonavir-boosted lopinavir. These data suggest that maraviroc is a well-tolerated antiretroviral that can be used in this setting."



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The content in this slide set does not represent the official views of the U.S. Department of Health and Human Services, Health Resources & Services Administration.



