Switching ZDV-3TC-Based Therapy to TDF-FTC-Based Therapy

SONETT

SONETT: Study Design

Study Design: SONETT

- **Background**: Prospective, non-randomized, single-group, open-label study assessing the effects of a switch from BID ZDV-3TC plus a BID 3rd agent to QD TDF-FTC plus a different 3rd agent to make a QD regimen
- **Inclusion Criteria:**
  - Adults with HIV infection
  - Receiving a stable regimen of BID ZDV-3TC plus a BID 3rd agent
  - HIV RNA <50 copies/mL
  - CD4 count >50 cells/mL
  - Side effects to current regimen; deemed would benefit from a QD regimen, or both

→ *Switch to:*
Tenofovir DF-Emtricitabine + Once Daily Third Agent
(n = 51)

Source: Arasteh K, et al. Eur J Med Res. 2009;14:195-9.

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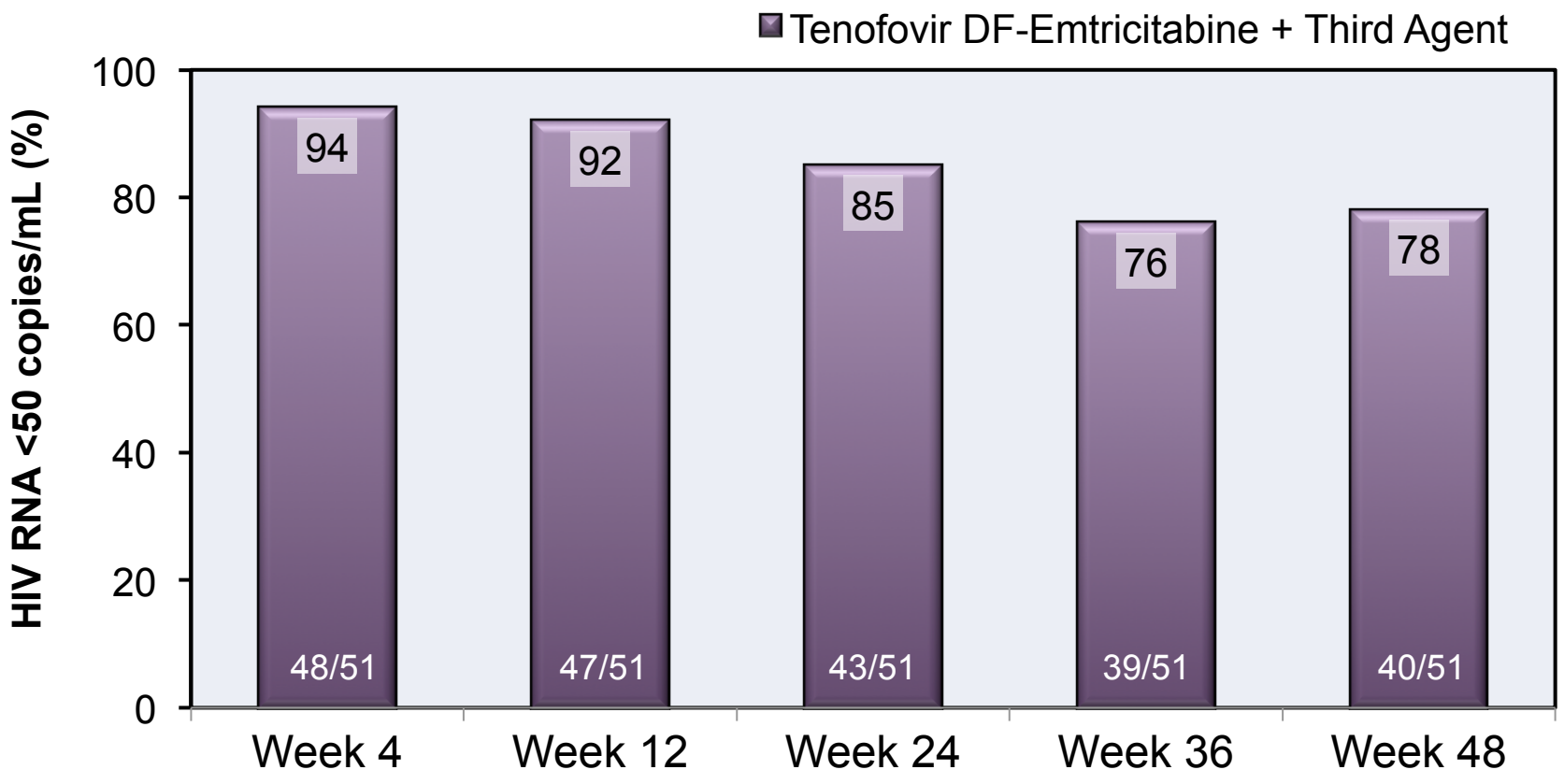
SONETT: Results

Virologic Suppression (Intention-to-Treat Analysis)



41/51 (80.4%) of participants completed full 48 weeks of treatment

Source: Arasteh K, et al. Eur J Med Res. 2009;14:195-9.

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SONETT: Results

Laboratory Results: Change from Baseline to Week 48 (Median Values)			
	Baseline	Change at Week 48	P Value
CD4 count (cells/μL)	526	30	0.23
Haemoglobin (g/dL)	14.8	0.8	<0.001
Fasting total cholesterol (mg/dL)	194.0	-5.0	0.203
Fasting total cholesterol (mg/dL) in participants with baseline value >200 mg/dL (n = 22)	240.5	-26.0	0.001
Fasting HDL (mg/dL)	50.5	52	0.094
Creatinine clearance (mL/min)	114.0	-1.3	0.20

Source: Arasteh K, et al. Eur J Med Res. 2009;14:195-9.

SONETT: Conclusion

Conclusions: “Results from this study support switching from a ZDV/3TC-containing HAART regimen to a completely QD regimen of TDF/FTC plus a third agent. Virologic and immunologic control are maintained, with apparent benefits in haemoglobin.”

Source: Arasteh K, et al. Eur J Med Res. 2009;14:195-9.

Acknowledgment

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National HIV Curriculum

AETC AIDS Education & Training Center Program
National Coordinating Resource Center