

Intensive Enfuvirtide-Containing Antiretroviral Therapy  
**APOLLO (ANRS 130)**

# Intensive Enfuvirtide-containing Antiretroviral Therapy

## APOLLO (ANRS 130): Study Design

### Study Design: APOLLO (ANRS 130)

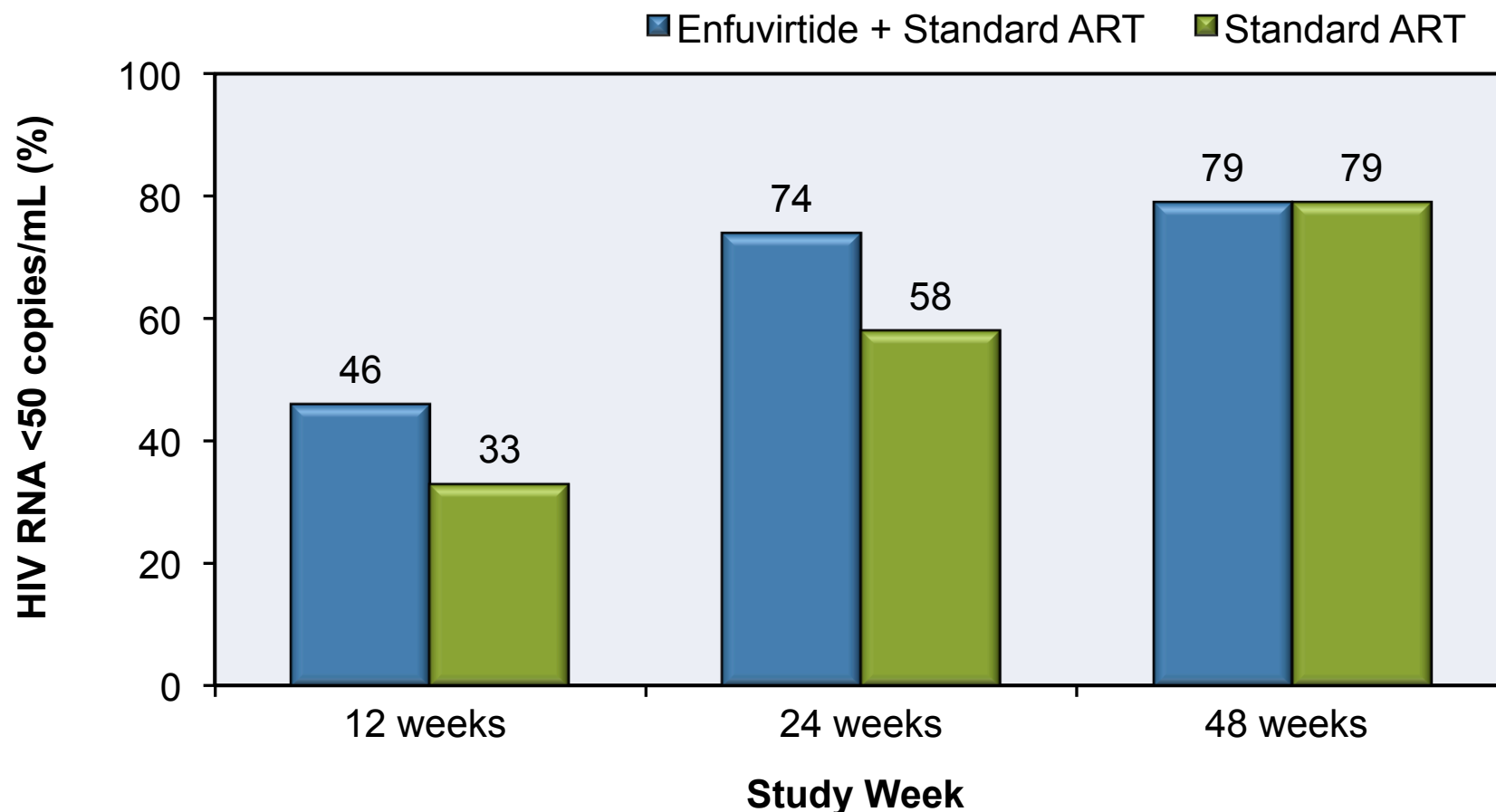
- **Background:** Randomized, open label phase 3 study evaluating whether the addition of enfuvirtide to standard triple antiretroviral therapy improves immunological response in antiretroviral-naïve subjects with advanced HIV disease
- **Inclusion Criteria (n = 195)**
  - Antiretroviral-naïve patients
  - Asymptomatic with CD4 count  $<100$  cells/mm<sup>3</sup> or stage B/C disease with CD4 count  $<200$  cells/mm<sup>3</sup>
  - Any HIV RNA level
- **Treatment Arms**
  - LPV-RTV 400/100 mg BID or EFV 600 mg QD, + TDF-FTC + Enfuvirtide 90 mg BID
  - LPV-RTV 400/100 mg BID or EFV 600 mg QD, + TDF-FTC

*Enfuvirtide arm*  
**LPV/r or EFV + TDF-FTC  
+ Enfuvirtide**  
(n = 101)

*Control arm*  
**LPV/r or EFV + TDF-FTC**  
(n = 94)

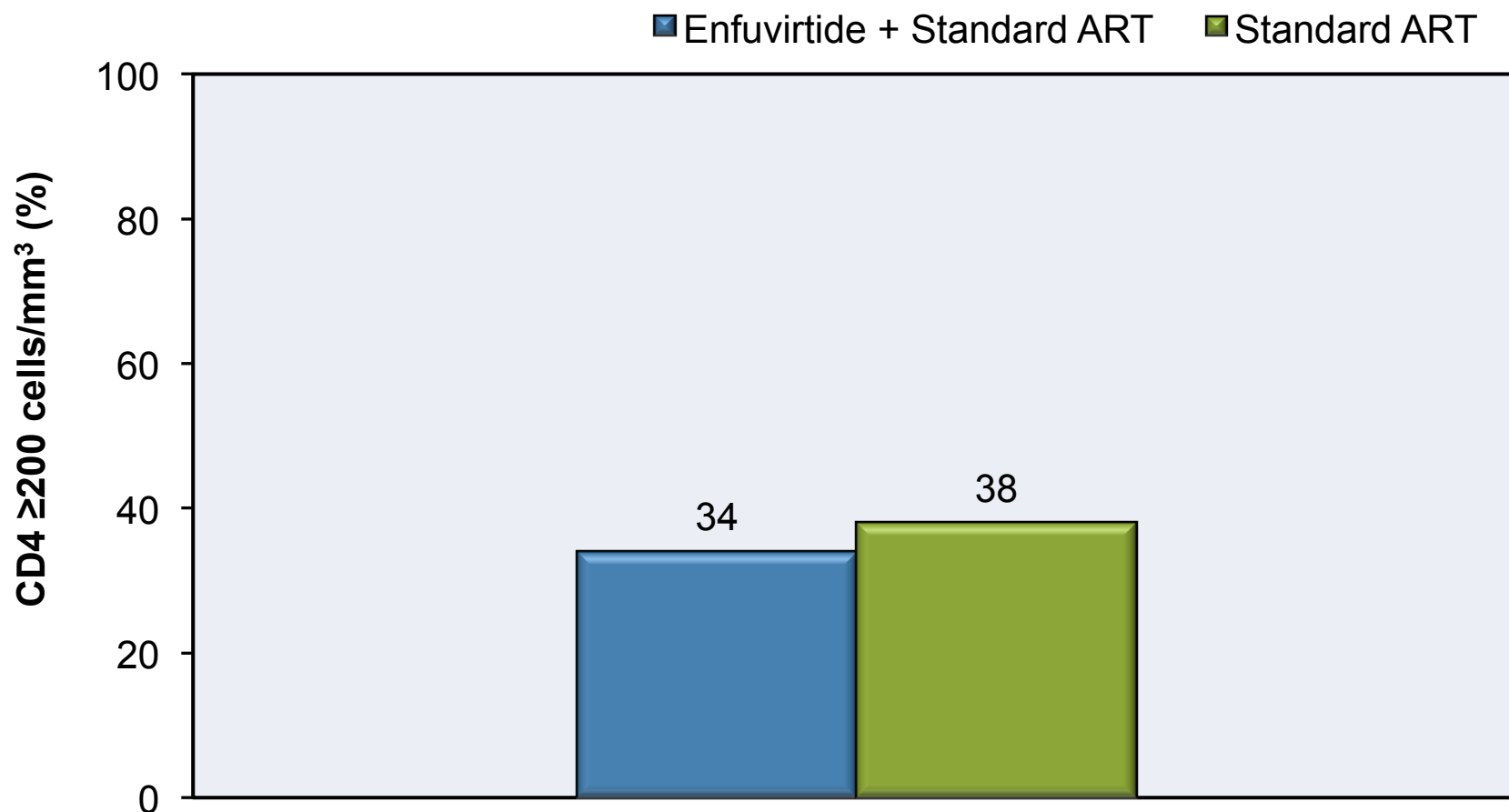
# Intensive Enfuvirtide-containing Antiretroviral Therapy APOLLO (ANRS 130): Result

Weeks 12 through 48: Virologic Response



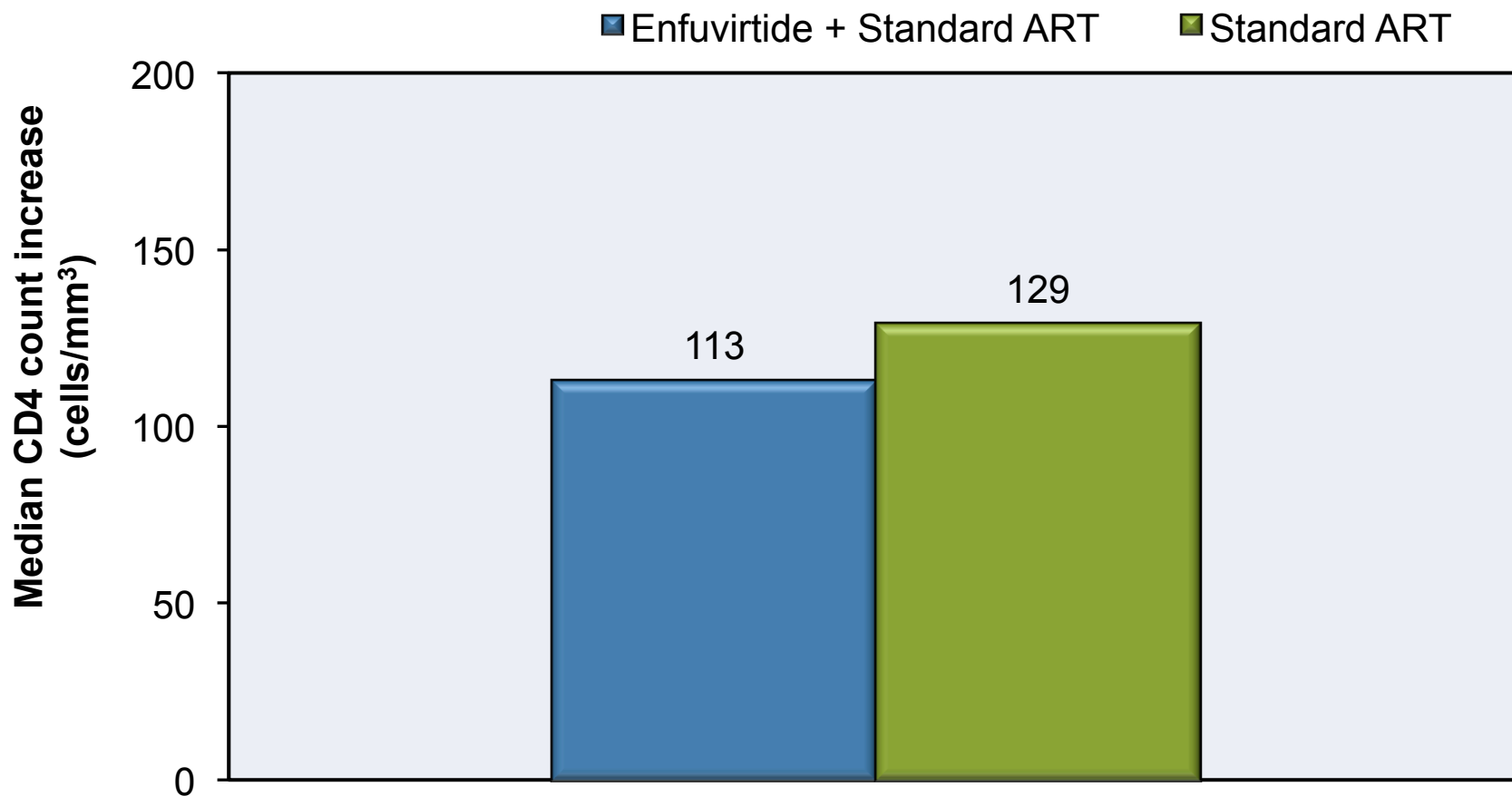
# Intensive Enfuvirtide-containing Antiretroviral Therapy APOLLO (ANRS 130): Result

## Week 24: Immunologic Response



# Intensive Enfuvirtide-containing Antiretroviral Therapy APOLLO (ANRS 130): Result

Week 24: Immunologic Response



Source: Joly V, et al. Antimicrob Agents Chemother. 2013;57:758-65.

# Intensive Enfuvirtide-containing Antiretroviral Therapy APOLLO (ANRS 130): Result

Clinical adverse events in Either Arm		
	Enfuvirtide + Standard ART arm (n = 100)	Standard ART (n= 94)
Clinical adverse events		
Any grade	92%	90%
Any grade and treatment related	61%	55%
Grades 3 and 4	23%	30%
Grades 3 and 4 and treatment related	7%	9%
Serious	28%	29%
Serious and study treatment related	9%	14%
AIDS events	20%	13%
IRIS	15%	21%
Deaths	2%	2%

Source: Joly V, et al. Antimicrob Agents Chemother. 2013;57:758-65.

# Intensive Enfuvirtide-containing Antiretroviral Therapy APOLLO (ANRS 130): Conclusions

**Conclusions:** “Although inducing a more rapid virological response, addition of enfuvirtide to a standard cART does not improve the immunological outcome in naive HIV-infected patients with severe immunosuppression.”

# Acknowledgment

The **National HIV Curriculum** is an AIDS Education and Training Center (AETC) Program resource funded by the United States Health Resources and Services Administration. The project is led by the University of Washington and the AETC National Coordinating Resource Center.

*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.*

