

BIC-TAF-FTC vs. DTG + TAF-FTC as Initial Therapy  
**GS-1490**

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## GS-1490: Design

### GS-1490: Study Design

- **Background:** Randomized, double-blind, active-controlled, phase 3 study evaluating the efficacy and safety of bicitegravir-tenofovir alafenamide-emtricitabine versus dolutegravir plus tenofovir alafenamide-emtricitabine for treatment-naïve individuals
- **Inclusion Criteria**
  - Age  $\geq 18$
  - Antiretroviral-naïve (or  $\leq 10$  days of treatment)
  - HIV RNA  $\geq 500$  copies/mL
  - eGFR  $\geq 30$  mL/min
- **Regimens**
  - Bicitegravir-TAF-FTC (50/200/25 mg)
  - Dolutegravir (50 mg) + TAF-FTC (200/25 mg)

**Bicitegravir-TAF-FTC**  
(n = 320)

**Dolutegravir + TAF-FTC**  
(n = 325)

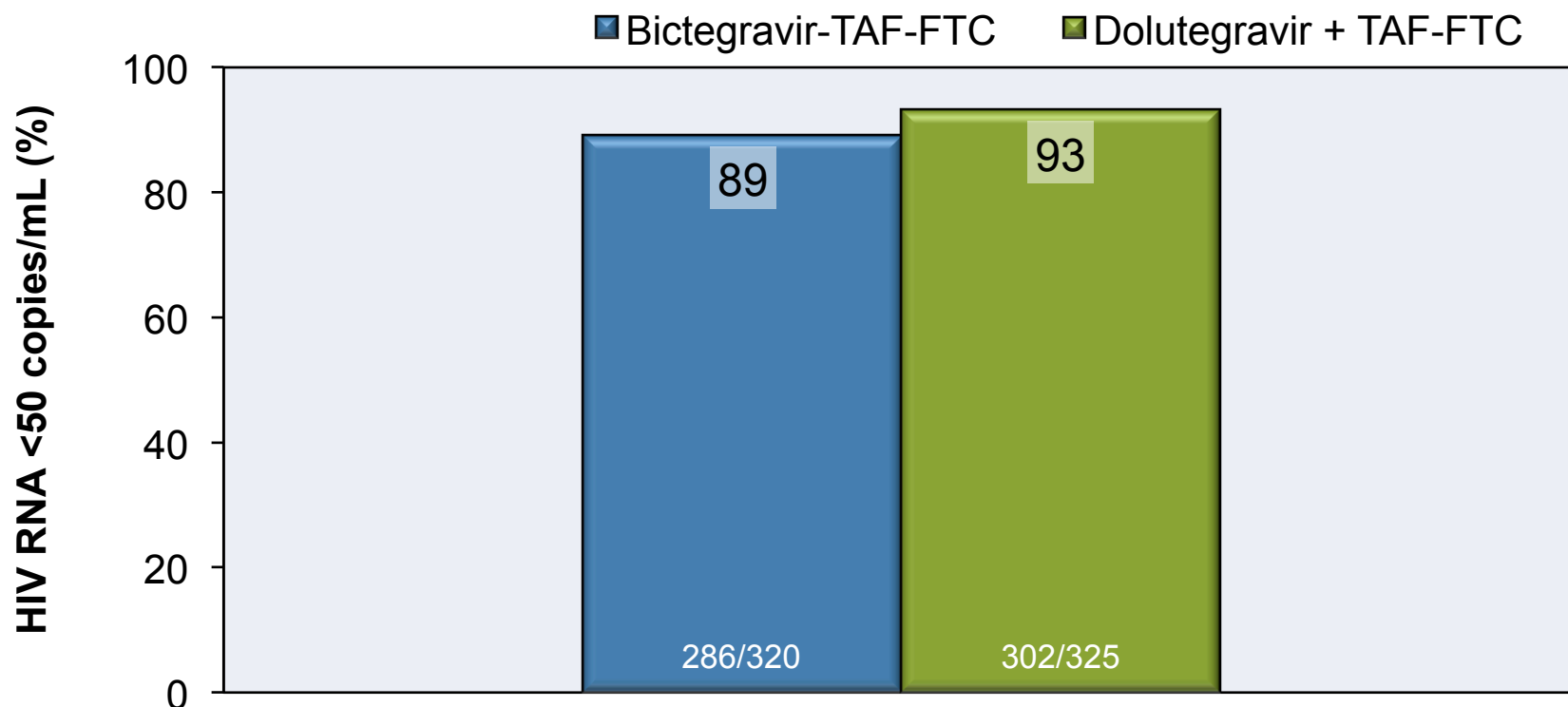
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## GS-1490: Baseline Characteristics

<b>Study 1490 Baseline Characteristics</b>		
<b>Characteristic</b>	<b>BIC-TAF-FTC (n = 320)</b>	<b>DTG + TAF-FTC (n = 325)</b>
Median age, years (range)	33 (27-46)	34 (27-46)
Male, %	88	89
Black or African descent, %	30	31
HIV RNA >100,000 copies/mL, %	21	17
CD4 count <200 cells/mm <sup>3</sup> , %	14	10
HBV coinfection, %	3	2
HCV coinfection, %	2	2
Median CrCl, mL/min	120.4	120.6
Abbreviations: CrCl = creatinine clearance		

# BIC-TAF-FTC vs. DTG + TAF-FTC as Initial Therapy GS-1490: Results

Week 48 Virologic Response (Intention-to-Treat Analysis)



No participant discontinued due to lack of efficacy in either arm  
No treatment-emergent resistance to any study drug occurred

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## GS-1490: Results

Treatment Emergent Adverse Events in Study 1490 (AE's >5%) Through Week 48		
	BIC-TAF-FTC (n = 320)	DTG + TAF-FTC (n = 325)
Headache, %	13	12
Diarrhea, %	12	12
Nausea, %	8	9
Fatigue, %	6	8
Arthralgia, %	5	3
Insomnia, %	5	4
Change in eGFR	-7.3 mL/min	-10.8 mL/min
Abbreviations: eGFR = estimated glomerular filtration		

# BIC-TAF-FTC vs. DTG + TAF-FTC as Initial Therapy GS-1490: Conclusions

**Interpretation:** “At 48 weeks, virological suppression with the bicitegravir regimen was achieved and was non-inferior to the dolutegravir regimen in previously untreated adults. There was no emergent resistance to either regimen. The fixed-dose combination of bicitegravir, emtricitabine, and tenofovir alafenamide was safe and well tolerated compared with the dolutegravir regimen.”

# 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.*

