

DOR-TDF-3TC vs. EFV-TDF-FTC as Initial Therapy

DRIVE AHEAD

Doravirine-TDF-3TC versus Efavirenz-TDF-FTC as Initial Therapy

DRIVE AHEAD: Design

- **Design**

- Randomized, double-blind, phase 3 study comparing fixed dose doravirine-tenofovir DF-lamivudine with fixed dose efavirenz-tenofovir DF-emtricitabine as initial antiretroviral therapy

- **Inclusion Criteria**

- Antiretroviral-naïve
- Age ≥ 18 years
- HIV RNA $\geq 1,000$ copies/mL
- No resistance to any study drug

- **Regimens**

- Doravirine-TDF-3TC (100/300/300 mg) daily
- Efavirenz-TDF-FTC (600/300/200 mg) daily

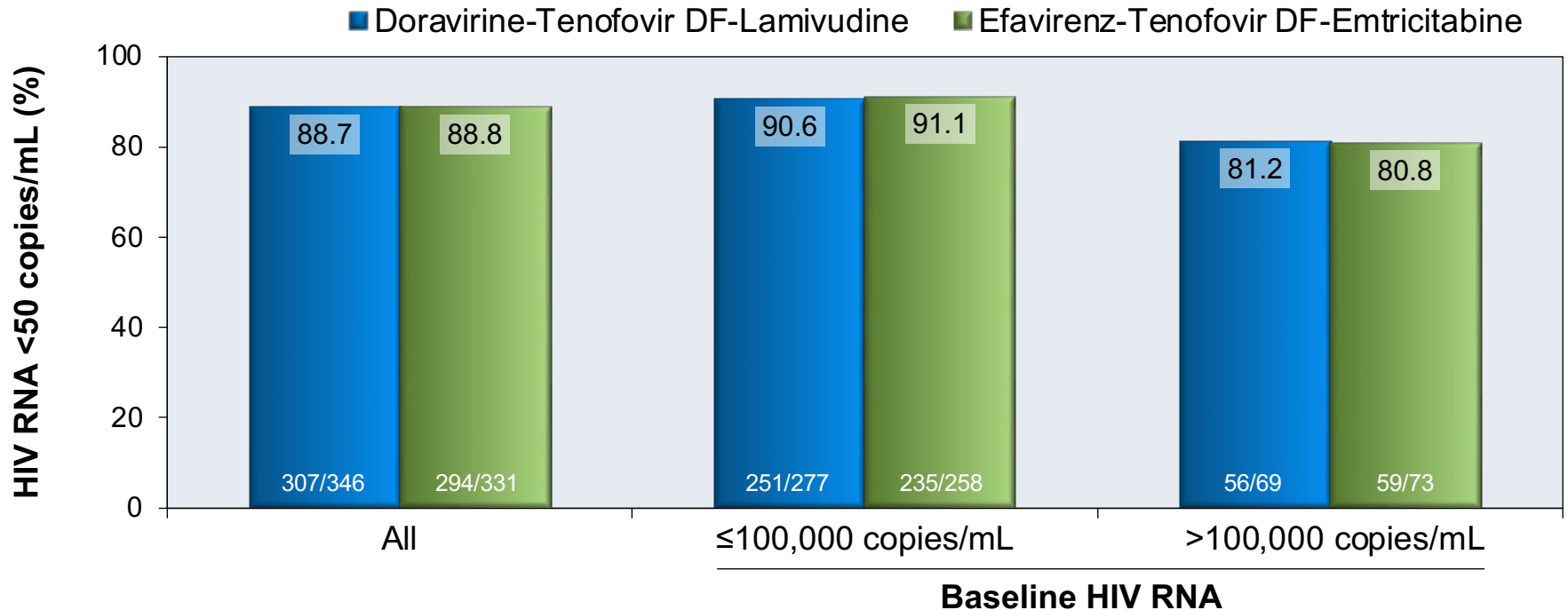
Doravirine-TDF-3TC
(n = 364)

Efavirenz-TDF-FTC
(n = 364)

Doravirine-TDF-3TC versus Efavirenz-TDF-FTC as Initial Therapy

DRIVE AHEAD: 48 Week Results

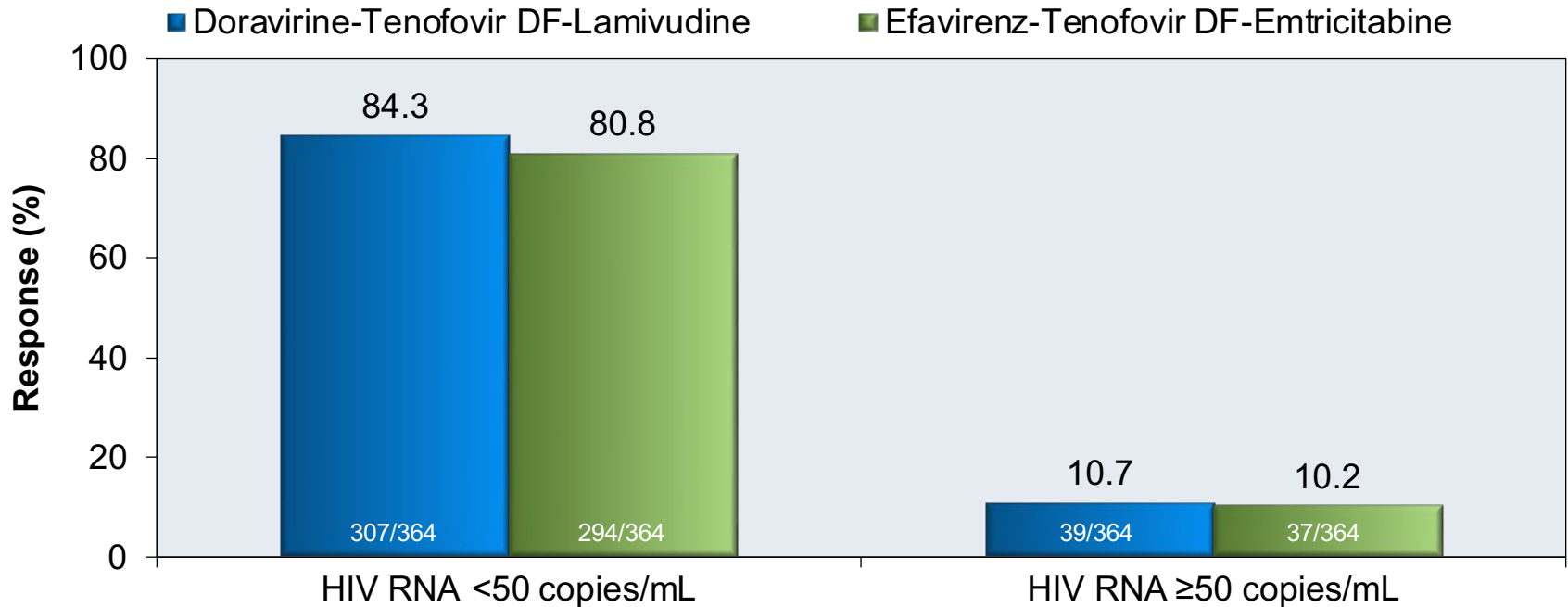
Week 48 Virologic Response (Observed Failure)



Doravirine-TDF-3TC versus Efavirenz-TDF-FTC as Initial Therapy

DRIVE AHEAD: Results

Week 48 Virologic Response (FDA Snapshot: All missing data = Failure)



Doravirine-TDF-3TC versus Efavirenz-TDF-FTC as Initial Therapy

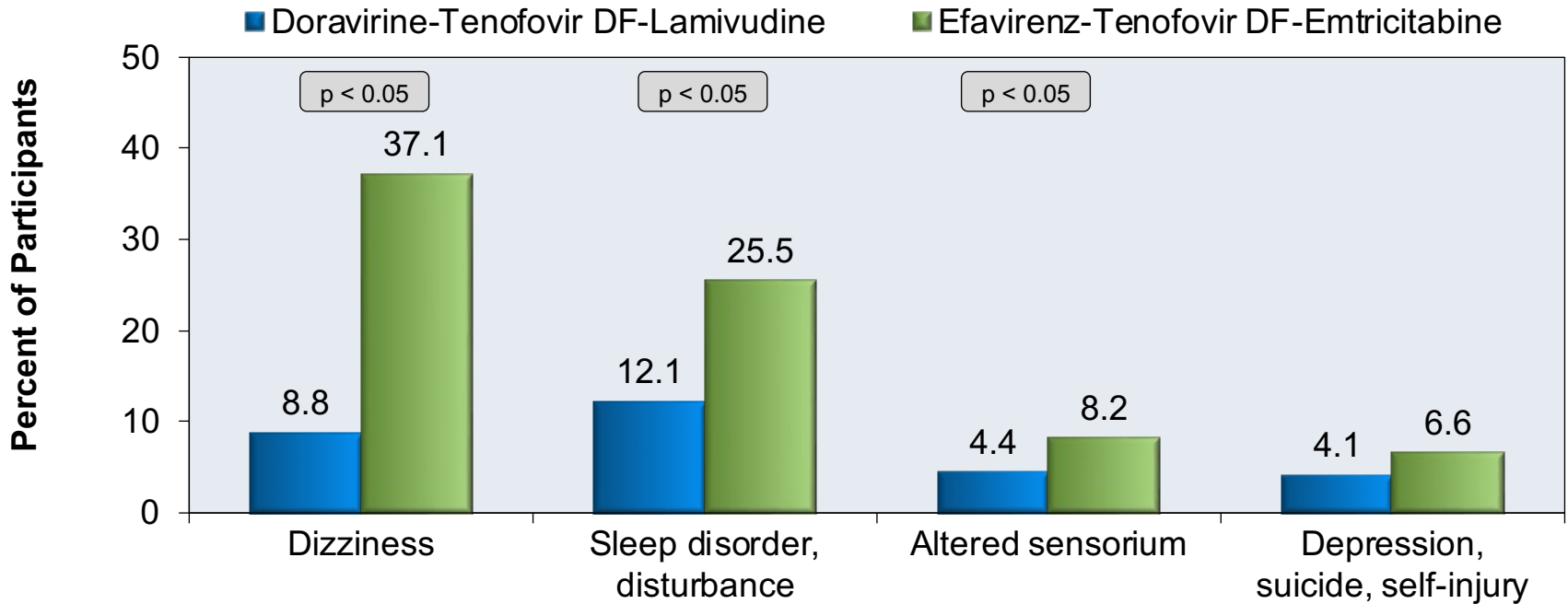
DRIVE AHEAD: Adverse Effects

Treatment Emergent Adverse Events in DRIVE AHEAD Through Week 48		
Adverse Effects	DOR/TDF/3TC (n = 364)	EFV/TDF/FTC (n = 364)
Drug-related AE's, %	31	63
Discontinued due to drug-related AE, %	3	7
Headache, %	13	12
Diarrhea, %	11	13
Nausea, %	8	11
Vomiting, %	4	7
Abnormal Dreams, %	5	12
Rash, %	5	12

Doravirine-TDF-3TC versus Efavirenz-TDF-FTC as Initial Therapy

DRIVE AHEAD: Adverse Effects

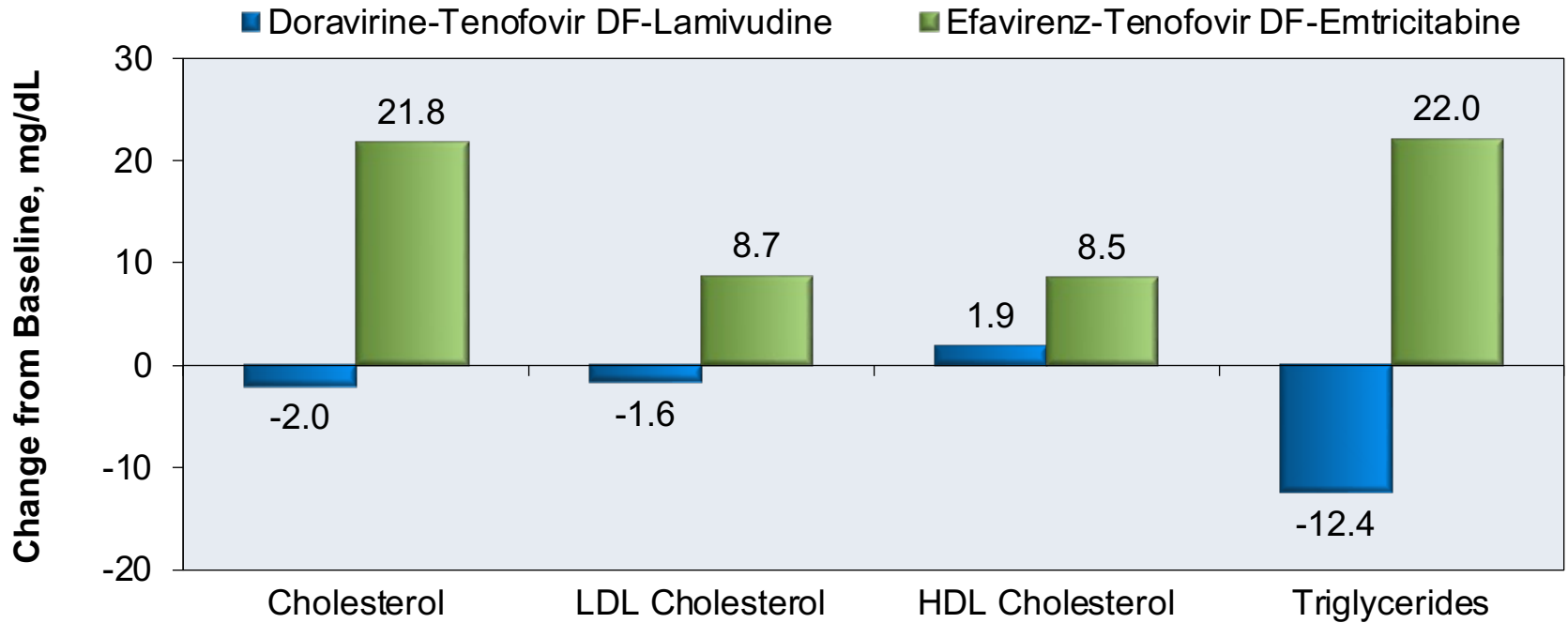
Proportion with Pre-Defined Neuropsychiatric Side Effects at Week 48



Doravirine-TDF-3TC versus Efavirenz-TDF-FTC as Initial Therapy

DRIVE AHEAD: Adverse Effects

Change in Baseline Fasting Lipids at Week 48



DOR-TDF-3TC vs. EFV-TDF-FTC as Initial Therapy

DRIVE AHEAD: Summary

Conclusions: “In HIV-1 treatment-naive adults, doravirine/lamivudine/tenofovir DF demonstrated non-inferior efficacy to efavirenz/emtricitabine/tenofovir DF at week 48 and was well tolerated, with significantly fewer neuropsychiatric events and minimal changes in LDL-C and non-HDL-C compared with efavirenz/emtricitabine/tenofovir DF.”

Acknowledgments

The **National HIV Curriculum** is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$1,021,448 with 0% financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit HRSA.gov. This project is led by the University of Washington's Infectious Diseases Education and Assessment (IDEA) Program.

