

Dolutegravir-Lamivudine (*Dovato*)

Prepared by:

Brian R. Wood, MD

David H. Spach, MD

Last Updated: November 28, 2022

Dolutegravir-Lamivudine



Dolutegravir-Lamivudine

50 mg

↳ INSTI

300 mg

↳ NRTI

Dose: 1 tablet once daily with or without food

Dolutegravir-Lamivudine

- **Indication**

- Complete regimen for the treatment of HIV-1 (initial or maintenance ART) for adults or adolescents 12 years or older weighing at least 40 kg
- Insufficient data for use in pregnancy

- **Class**

- Dolutegravir: integrase strand transfer inhibitor (INSTI)
- Lamivudine: nucleoside reverse transcriptase inhibitor (NRTI)

- **Dosing**

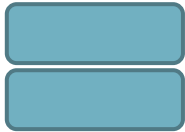
- Fixed dose tablet: Dolutegravir 50 mg and Lamivudine 300 mg
- 1 tablet once daily, with or without food
- Not recommended in patients with renal impairment
- Not recommended in patients with severe hepatic impairment (Child-Pugh C)

- **Common Adverse Effects (≥2%)**

- Headache, nausea, diarrhea, insomnia, fatigue, anxiety, and dizziness

HHS Antiretroviral Therapy Guidelines (September 21, 2022)
Dolutegravir-Lamivudine: Initial Antiretroviral Therapy

Initial Antiretroviral Therapy
Dolutegravir-Lamivudine (2-Drug Regimen)



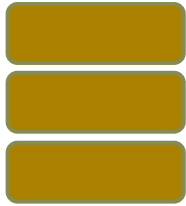
Baseline Requirements

- HIV RNA <500,000 copies/mL
- Hepatitis B surface antigen (HBsAg) negative
- Results from genotype known

Dolutegravir-Lamivudine: Maintenance Antiretroviral Therapy

Initial Antiretroviral Therapy
3-Drug Regimen

Maintenance Antiretroviral Therapy
Dolutegravir-Lamivudine (2-Drug Regimen)



Time

Requirements Prior to Switching

- HIV RNA <50 copies/mL for ≥ 6 months
- Hepatitis B surface antigen (HBsAg) negative
- No prior virologic failure
- No resistance to either maintenance drug

Dolutegravir-Lamivudine

Summary of Key Phase 3 Studies

- **Trials in Treatment-Naïve Adults**
 - GEMINI-1: DTG-3TC versus DTG + TDF-FTC as Initial Therapy
 - GEMINI-2: DTG-3TC versus DTG + TDF-FTC as Initial Therapy

- **Switch Trials in Adults with Virologic Suppression**
 - ASPIRE: Switch to DTG plus 3TC vs. 3-Drug Maintenance Regimen
 - TANGO: Switch to DTG-3TC vs. 3- or 4-Drug Maintenance Regimen
 - SALSA: Switch to DTG-3TC vs. 3- or 4-Drug Maintenance Regimen

Abbreviations: DTG-3TC = dolutegravir-lamivudine; DTG = dolutegravir; TDF-FTC = tenofovir DF-emtricitabine

**Dolutegravir-Lamivudine
Trials in Treatment Treatment-Naïve Adults**

DTG + 3TC versus DTG + TDF-FTC as Initial ART
GEMINI 1 and GEMINI 2: Week 48 Data

DTG + 3TC versus DTG + TDF-FTC as Initial ART

GEMINI 1 and GEMINI 2: Background

- **Background**

- Two double-blind, multinational, noninferiority, randomized, controlled trials that compared initial ART of dolutegravir plus lamivudine (DTG + 3TC) versus dolutegravir plus tenofovir-DF-emtricitabine (DTG + TDF-FTC)

- **Enrollment Criteria**

- Treatment-naïve adults
- HIV RNA 1,000-500,000 copies/mL
- No NRTI, INSTI, or major PI mutations
- No chronic HBV
- Not pregnant or breastfeeding

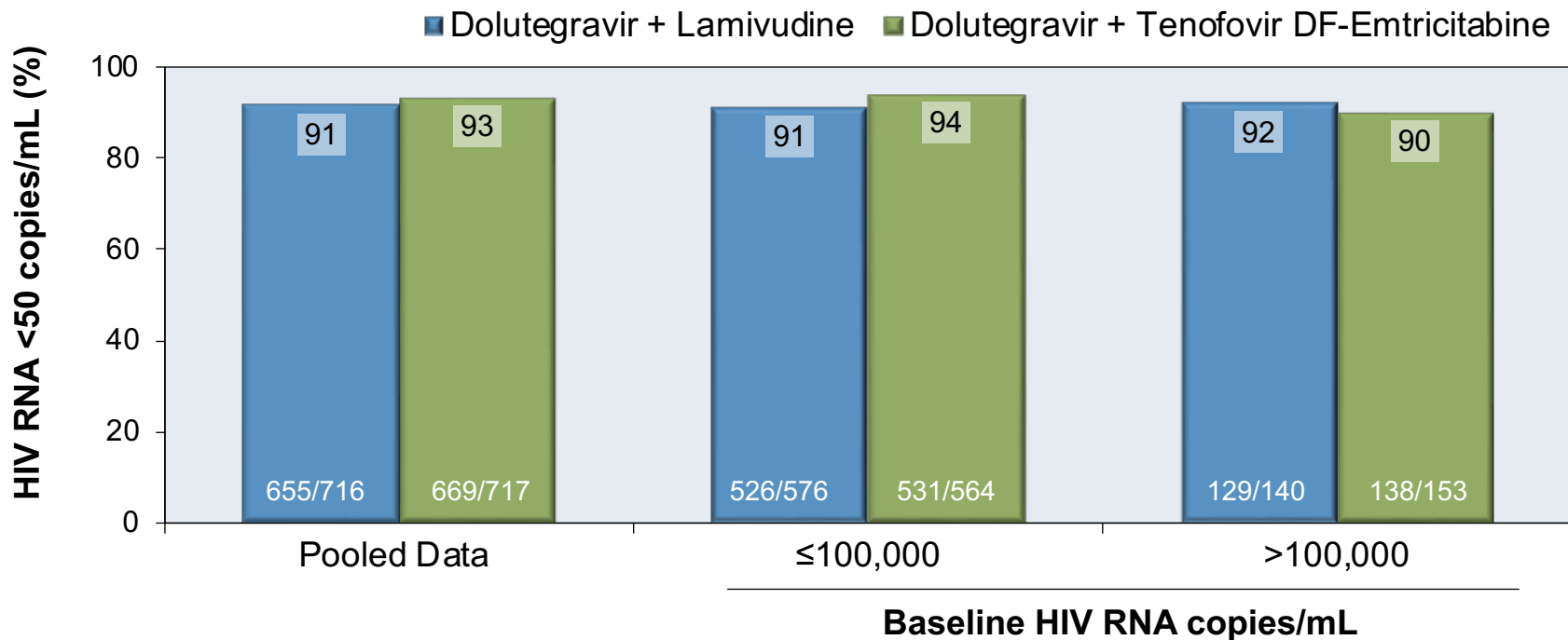
Dual ART
Dolutegravir + Lamivudine
(n = 716)

Triple ART
Dolutegravir + TDF-FTC
(n = 717)

DTG + 3TC versus DTG + TDF-FTC as Initial ART

GEMINI 1 and GEMINI 2: Results by Baseline HIV RNA Level

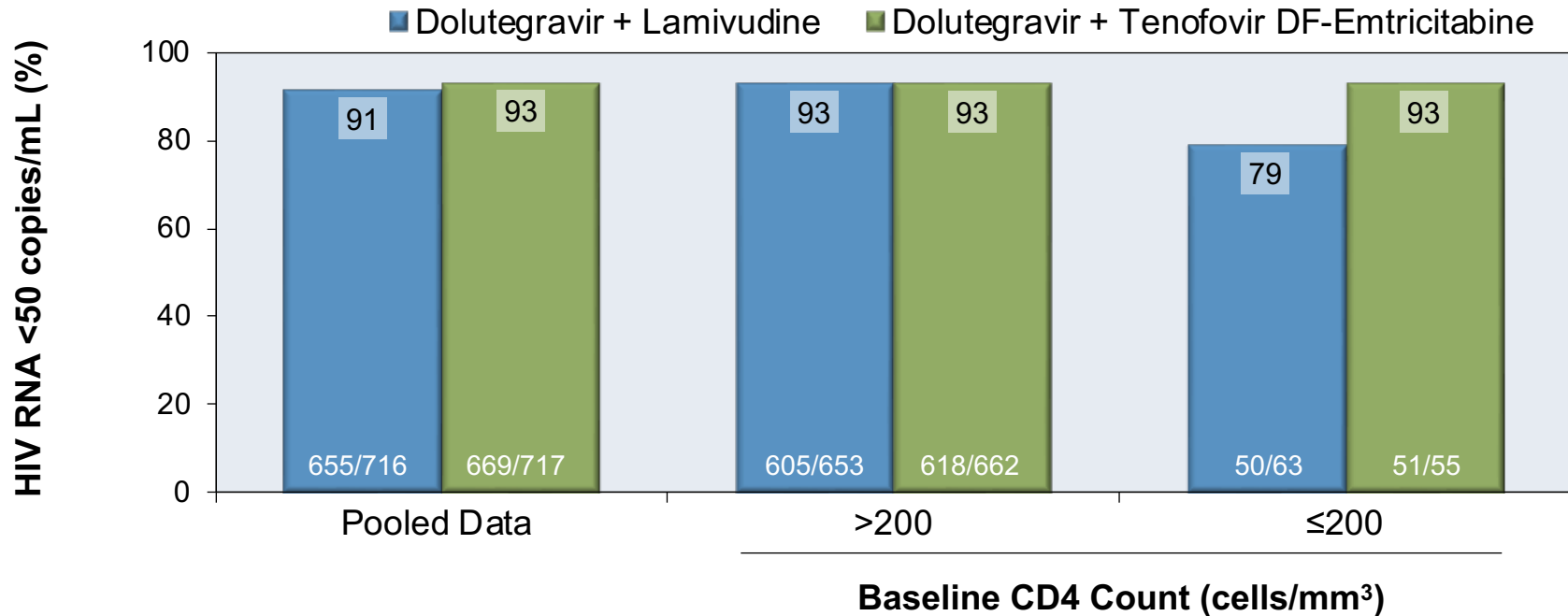
Week 48 Virologic Response (Intention-to-Treat Analysis)



DTG + 3TC versus DTG + TDF-FTC as Initial ART

GEMINI 1 and GEMINI 2: Results by Baseline HIV CD4 Cell Count

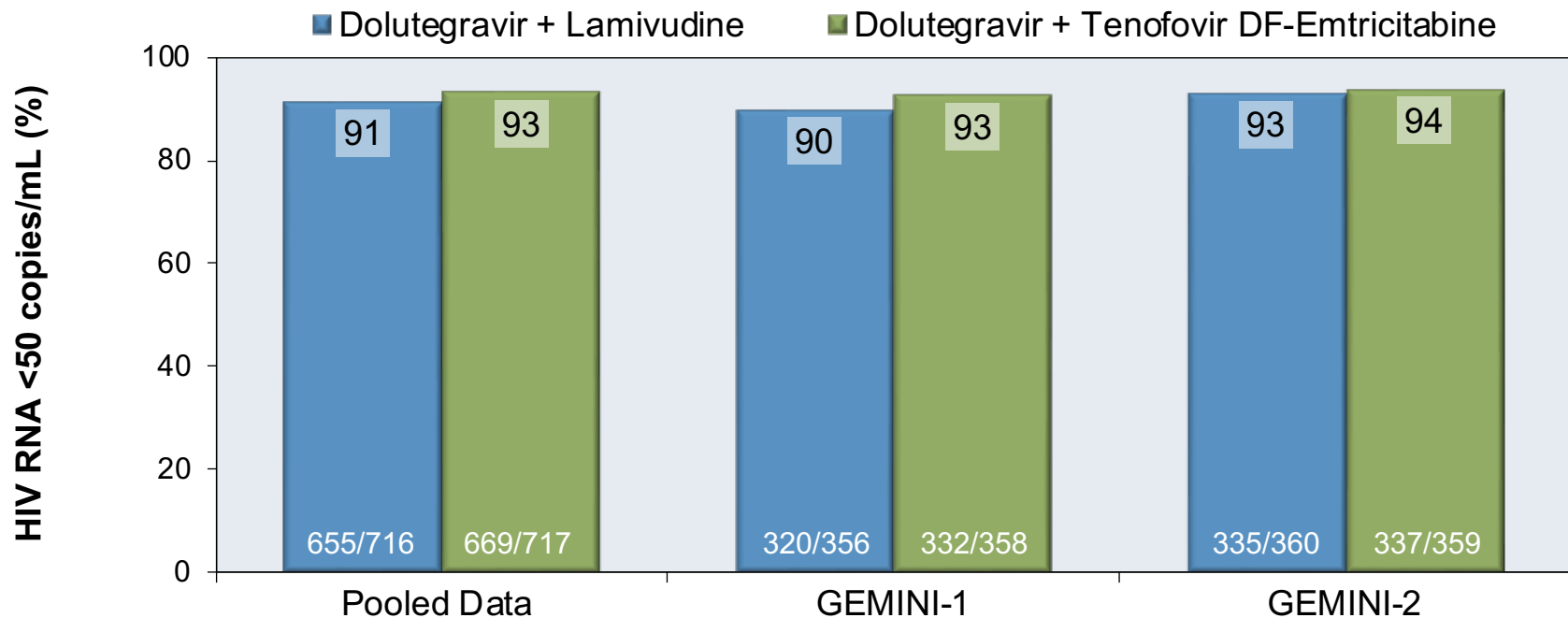
Week 48 Virologic Response (Intention-to-Treat Analysis)



DTG + 3TC versus DTG + TDF-FTC as Initial ART

GEMINI 1 and 2: Results

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



DTG + 3TC versus DTG + TDF-FTC as Initial ART

GEMINI 1 and 2: Baseline Characteristics

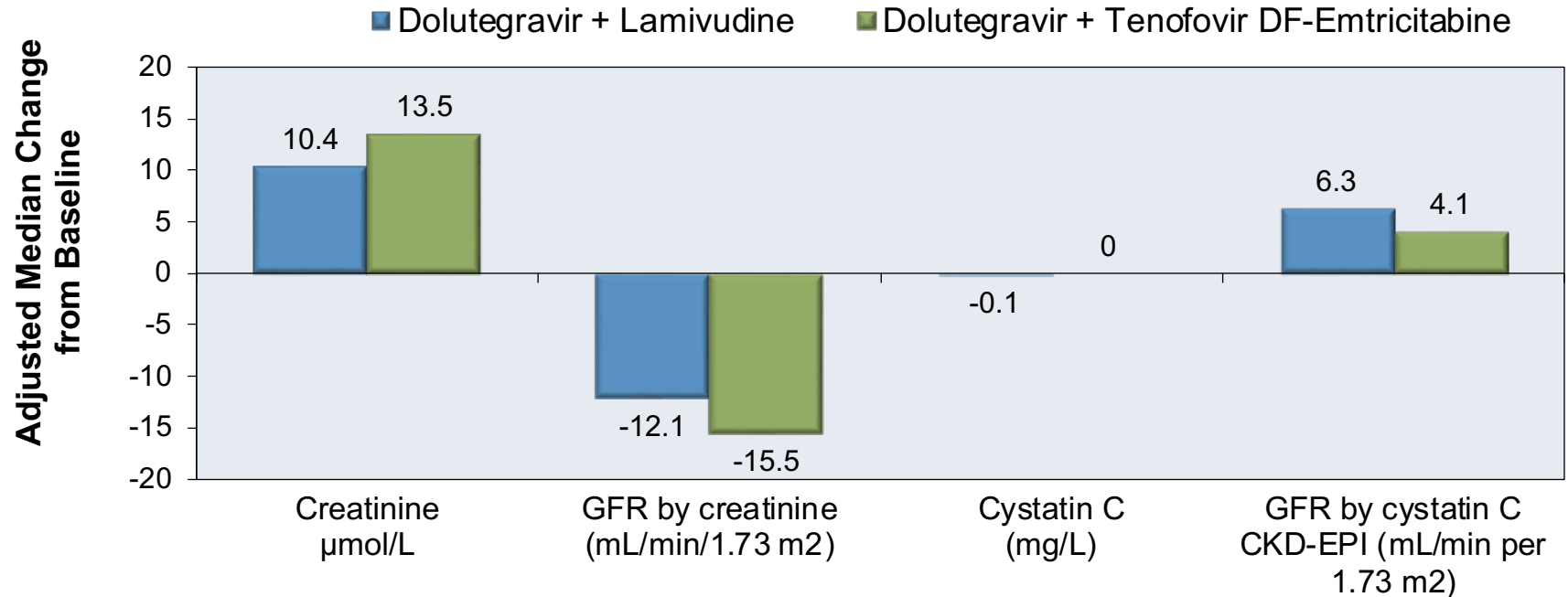
GEMINI 1 and 2 Baseline Characteristics		
Characteristic	DTG + 3TC (n = 716)	DTG + TDF-FTC (n = 717)
Age, years, median (IQR)	32 (26-40)	33 (26-42)
Female, n (%)	113 (16)	98 (14)
White, n (%)	480 (67)	497 (69)
Black or African American, n (%)	99 (14)	76 (11)
CD4 cell count, mean (SD)	462 (219.2)	461.3 (213.1)
CD4 count ≤ 200 cells/mm ³ , n (%)	63 (9)	55 (8)
HIV RNA (log ₁₀ copies/mL)	4.42 (0.66)	4.45 (0.65)
$\leq 100,000$ copies/mL, n (%)	576 (80)	564 (79)
$> 100,000$ copies/mL, n (%)	140 (20)	153 (21)

Source: Cahn P, et al. Lancet. 2019;393:143-55.

DTG + 3TC versus DTG + TDF-FTC as Initial ART

GEMINI 1 and 2: Results

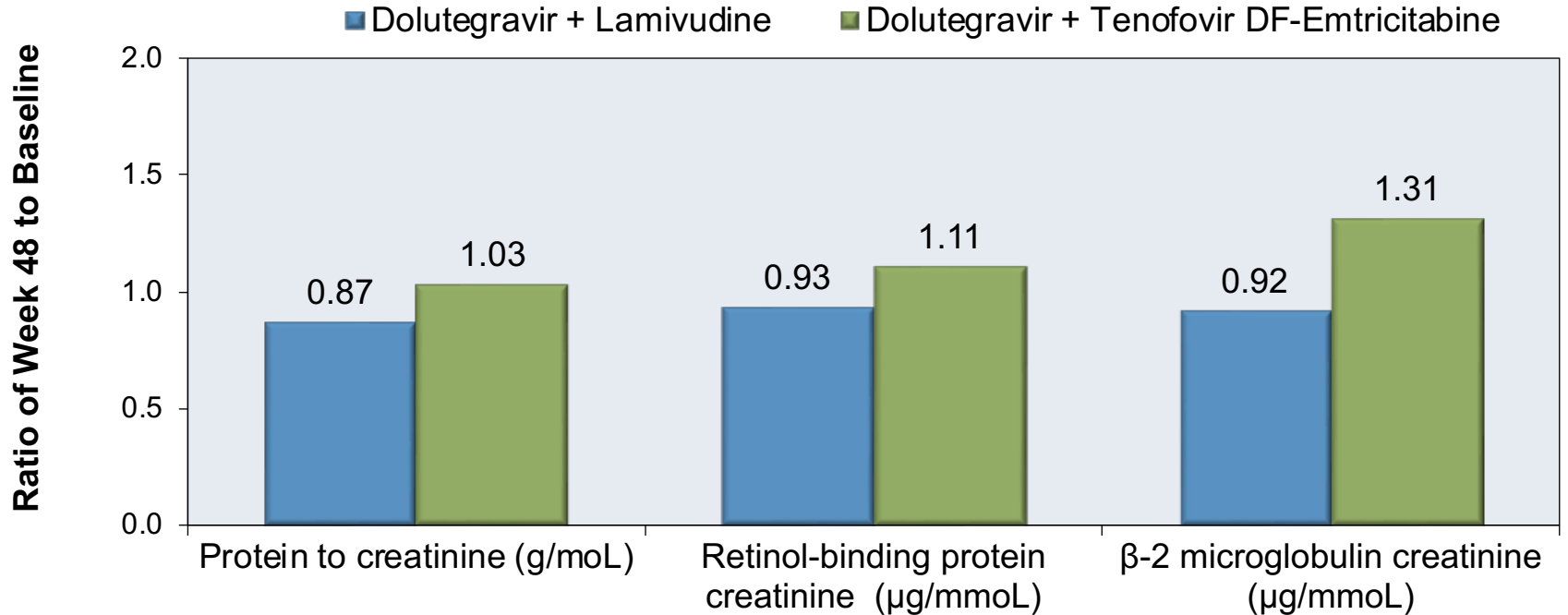
Week 48 Changes in Renal Function



DTG + 3TC versus DTG + TDF-FTC as Initial ART

GEMINI 1 and 2: Results

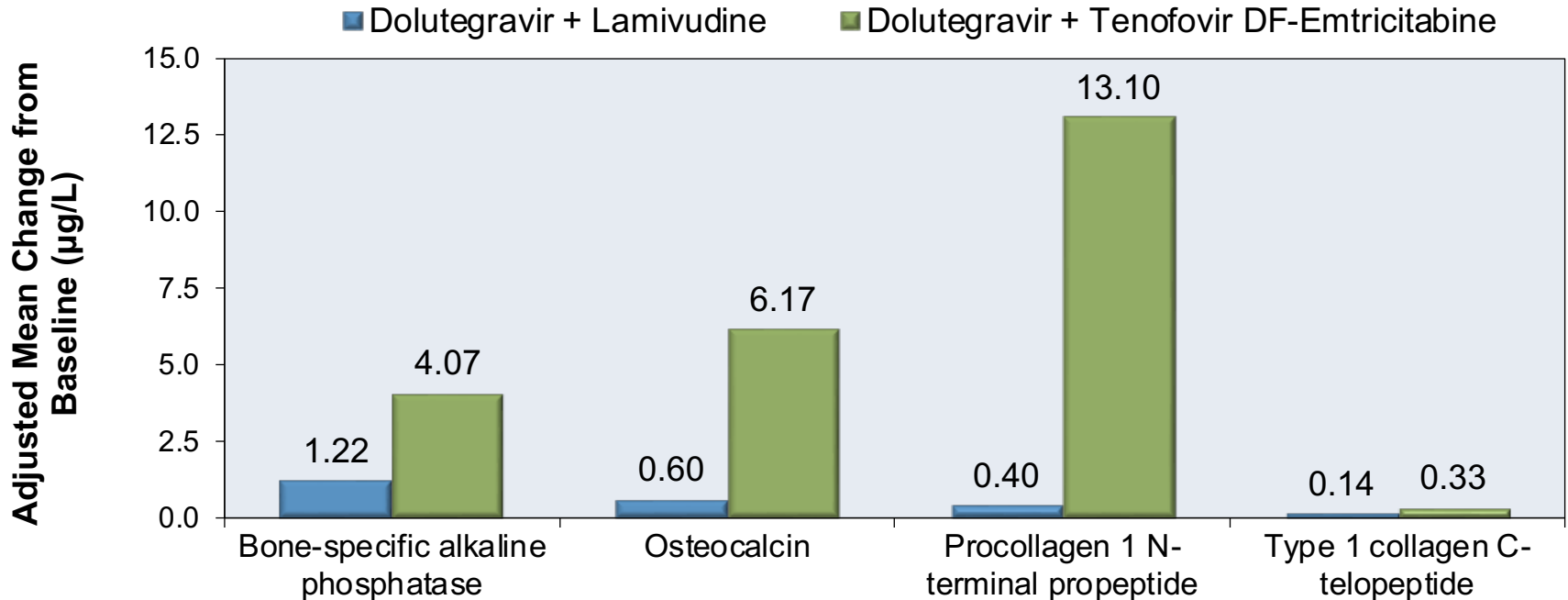
Week 48 Changes in Markers of Renal Proximal Tubulopathy



DTG + 3TC versus DTG + TDF-FTC as Initial ART

GEMINI 1 and 2: Results

Week 48 Changes in Serum Bone Biomarkers



DTG + 3TC versus DTG + TDF-FTC as Initial ART

GEMINI 1 and 2: Conclusions

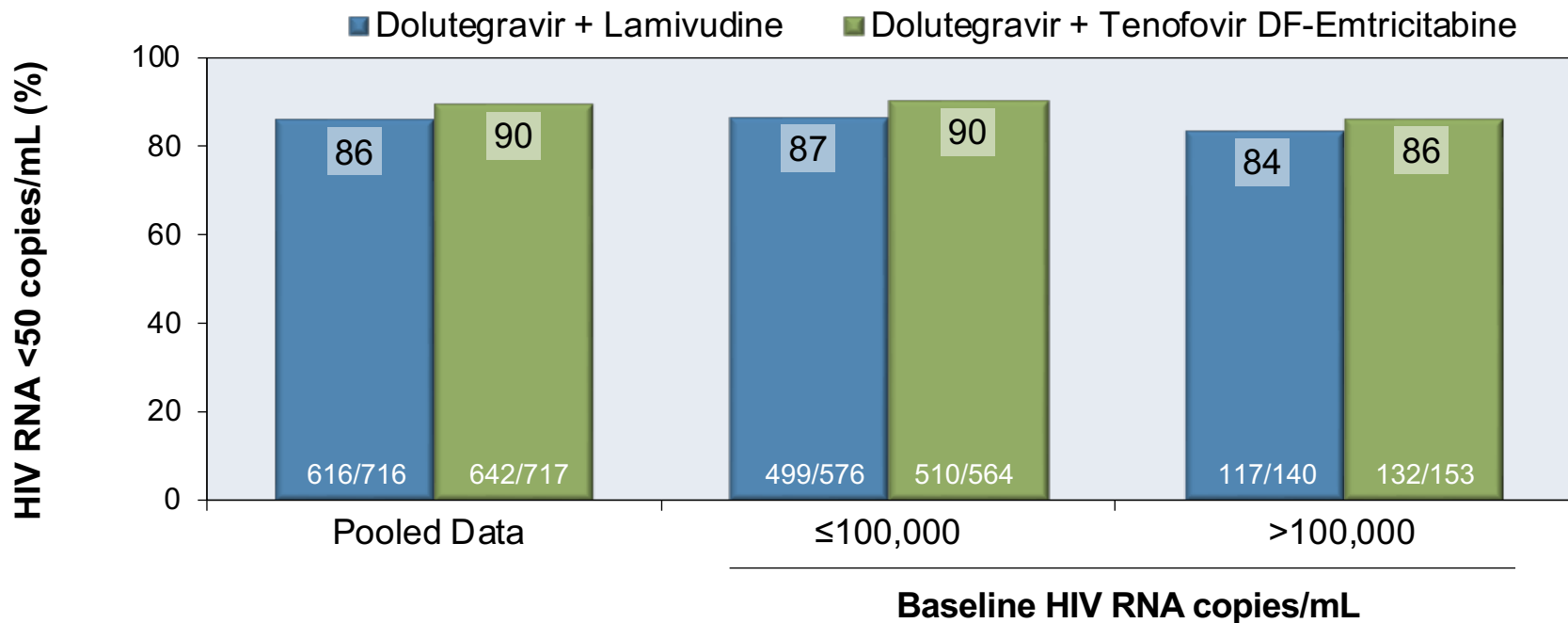
Interpretation: “The non-inferior efficacy and similar tolerability profile of dolutegravir plus lamivudine to a guideline-recommended three-drug regimen at 48 weeks in ART-naive adults supports its use as initial therapy for patients with HIV-1 infection.”

DTG + 3TC versus DTG + TDF-FTC as Initial ART
GEMINI 1 and GEMINI 2: Week 96 Data

DTG + 3TC versus DTG + TDF-FTC as Initial ART

GEMINI 1 and 2: Results by Baseline HIV RNA Level

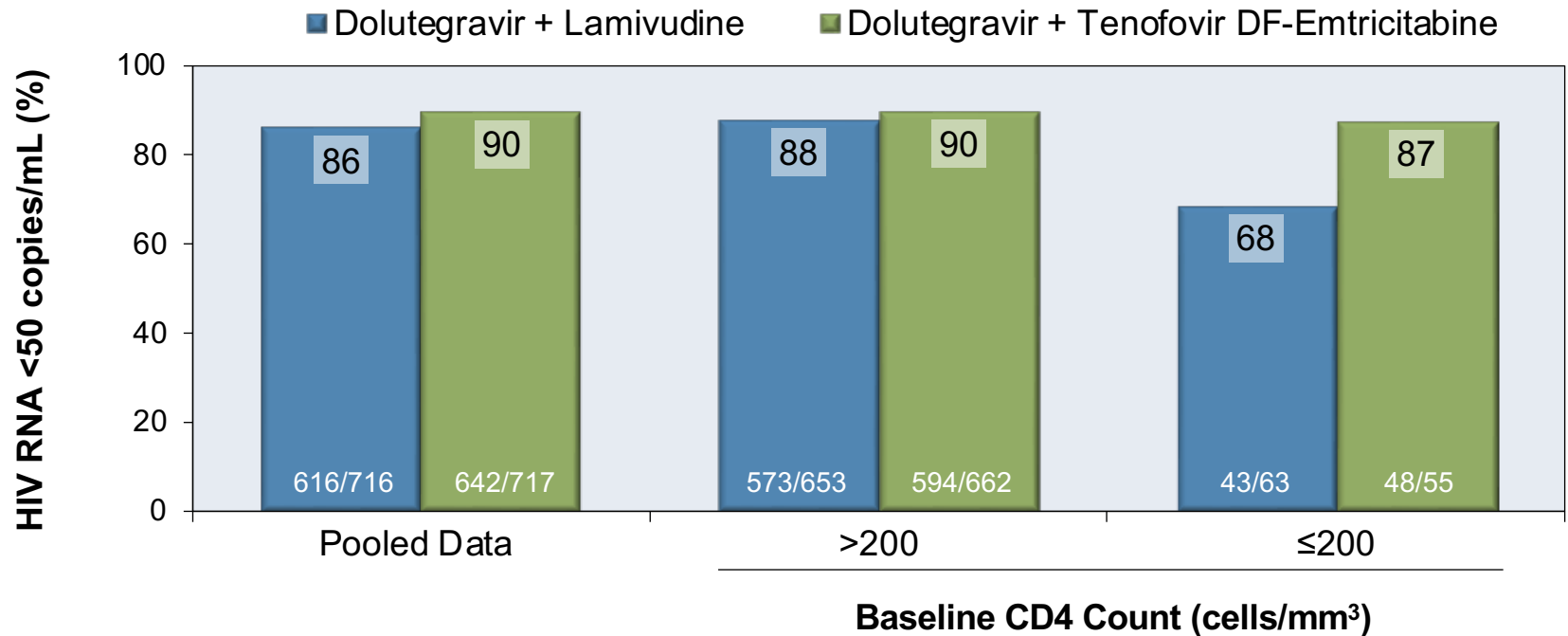
Week 96 Virologic Response (Intention-to-Treat Analysis)



DTG + 3TC versus DTG + TDF-FTC as Initial ART

GEMINI 1 and 2: Results by Baseline CD4 Cell Count

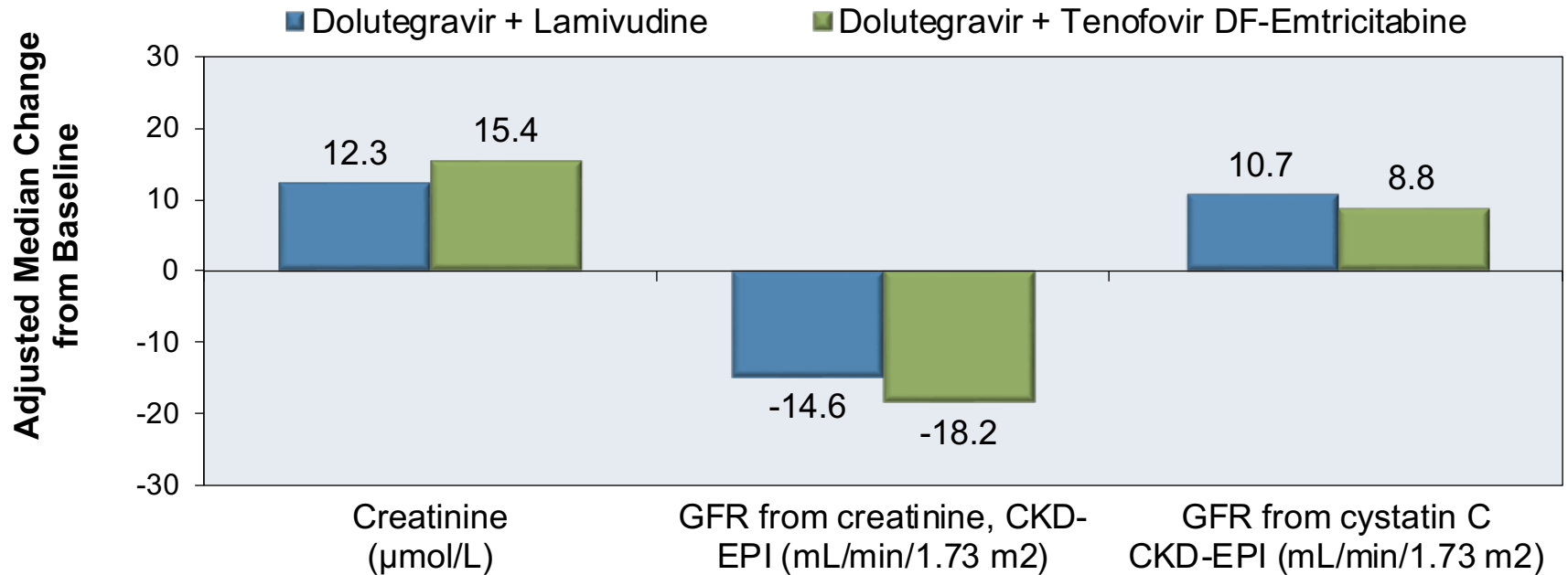
Week 96 Virologic Response (Intention-to-Treat Analysis)



DTG + 3TC versus DTG + TDF-FTC as Initial ART

GEMINI 1 and 2: Results

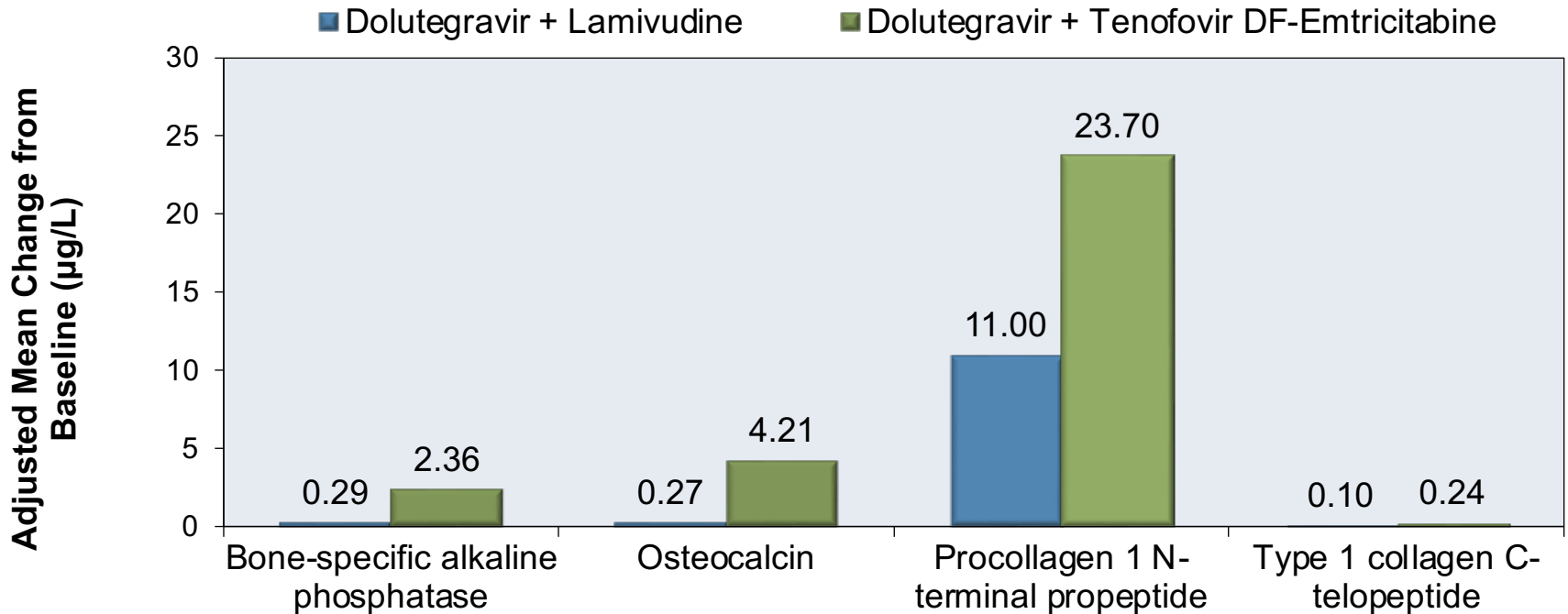
Week 96 Changes in Renal Function



DTG + 3TC versus DTG + TDF-FTC as Initial ART

GEMINI 1 and 2: Results

Week 96 Changes in Serum Bone Biomarkers



DTG + 3TC versus DTG + TDF-FTC as Initial ART GEMINI 1 and 2: Week 96 Conclusion

Conclusion: “Consistent with 48-week data, dolutegravir + lamivudine demonstrated long-term, non-inferior efficacy vs dolutegravir + tenofovir disoproxil fumarate/emtricitabine without increased risk of treatment emergent resistance, supporting its use in treatment-naive HIV-1–infected individuals.”

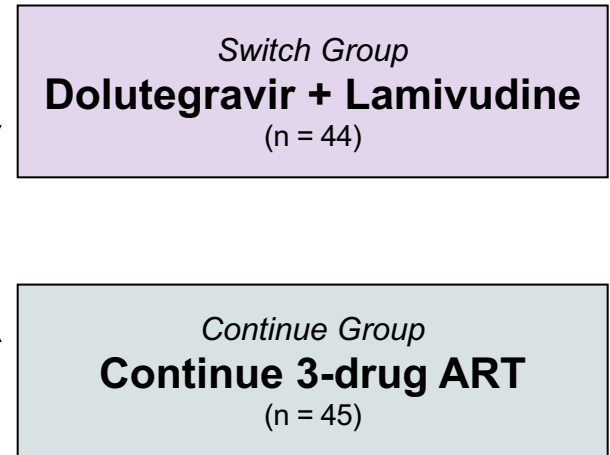
Dolutegravir-Lamivudine
Switch Studies in Adults with Virologic Suppression

Switch to DTG + 3TC versus Continued 3-Drug ART
ASPIRE

Switch to DTG + 3TC versus Continued 3-Drug Antiretroviral Therapy

ASPIRE: Background

- **Background:** Open-label, multicenter, pilot randomized trial that enrolled persons with suppressed HIV RNA levels and compared switch to 2-drug regimen versus continuing standard 3-drug antiretroviral therapy
- **Inclusion Criteria:**
 - Adults (age >18 years) with HIV
 - HIV RNA <50 copies/mL at least twice over 48 weeks
 - Screening HIV RNA <20 copies/mL
 - Taking any 3-drug ART regimen
 - No history of virologic failure
 - No known NRTI or INSTI resistance mutations
 - No chronic HBV
 - CrCl \geq 50 mL/min



Switch to DTG + 3TC versus Continued 3-Drug Antiretroviral Therapy

ASPIRE: Baseline Characteristics

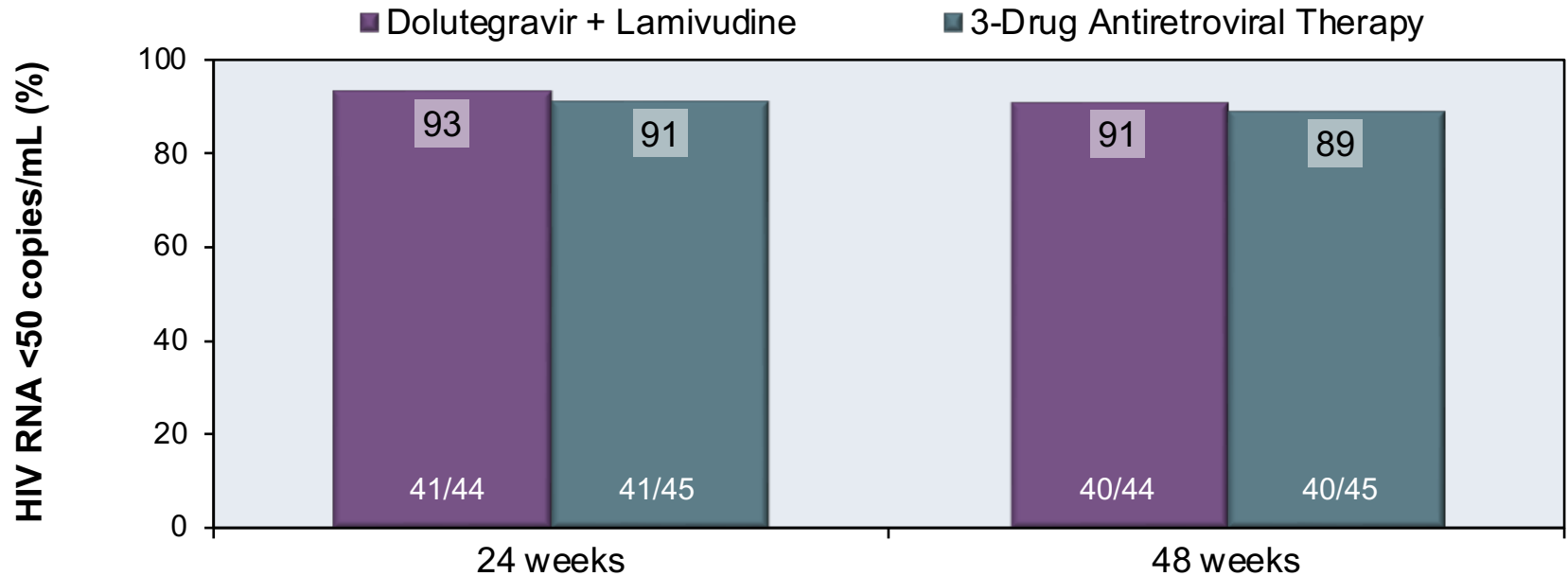
ASPIRE: Baseline Characteristics	
Characteristic	Combined Group Study Population (n = 89)
Age, years, median (IQR)	47 (38-54)
Male, %	88
White, %	60
Black or African American, %	38
Hispanic ethnicity, %	15
CD4 count, cells/mm ³ , median (IQR)	680 (498-927)
Time on ART, years, median (IQR)	5.7 (3.7-7.5)
Pre-randomization INSTI, %	37
Pre-randomization PI, %	33
Pre-randomization NNRTI, %	30

Source: Taiwo B, et al. Clin Infect Dis. 2018;66:1794-7.

Switch to DTG + 3TC versus Continued 3-Drug Antiretroviral Therapy

ASPIRE: Results at 24 & 48 Weeks

Week 24 & 48 Virologic Responses (Intention-to-Treat Analysis)



One virologic failure occurred in the dolutegravir + lamivudine arm; no resistance mutations detected

Switch to DTG + 3TC versus Continued 3-Drug Antiretroviral Therapy

ASPIRE: Conclusion

Conclusion: “In this randomized pilot clinical trial, dolutegravir plus lamivudine was noninferior to continuation of standard 3-drug maintenance antiretroviral therapy. There was no emergence of drug resistance in the participant who experienced virologic failure while receiving dolutegravir plus lamivudine.”

Switch to Dolutegravir-Lamivudine versus Continued TAF-Based 3-Drug ART

TANGO

Switch to DTG-3TC versus Continued TAF-Based Baseline Regimen

TANGO: Design

- **Design:** Open-label, non-inferiority trial in adults with suppressed HIV RNA while taking a 3- or 4-drug tenofovir alafenamide (TAF)-based regimen, randomized to switch to fixed-dose dolutegravir-lamivudine (DTG-3TC) or continue the baseline regimen
- **Inclusion Criteria**
 - Adults with suppressed HIV RNA >6 months
 - Taking 3- or 4-drug TAF-based ART
 - No history of virologic failure
 - No major NRTI resistance; no INSTI resistance
 - No hepatitis B or C
- **Regimens**
 - Dolutegravir-lamivudine (50/300mg) daily
 - TAF-based 3- or 4-drug baseline regimen

Switch Group
Dolutegravir-Lamivudine
(n = 369)

Continue Baseline Regimen Group
TAF-Based 3- or 4-Drug Regimen
(n = 372)

Switch to DTG-3TC versus Continued TAF-Based Baseline Regimen

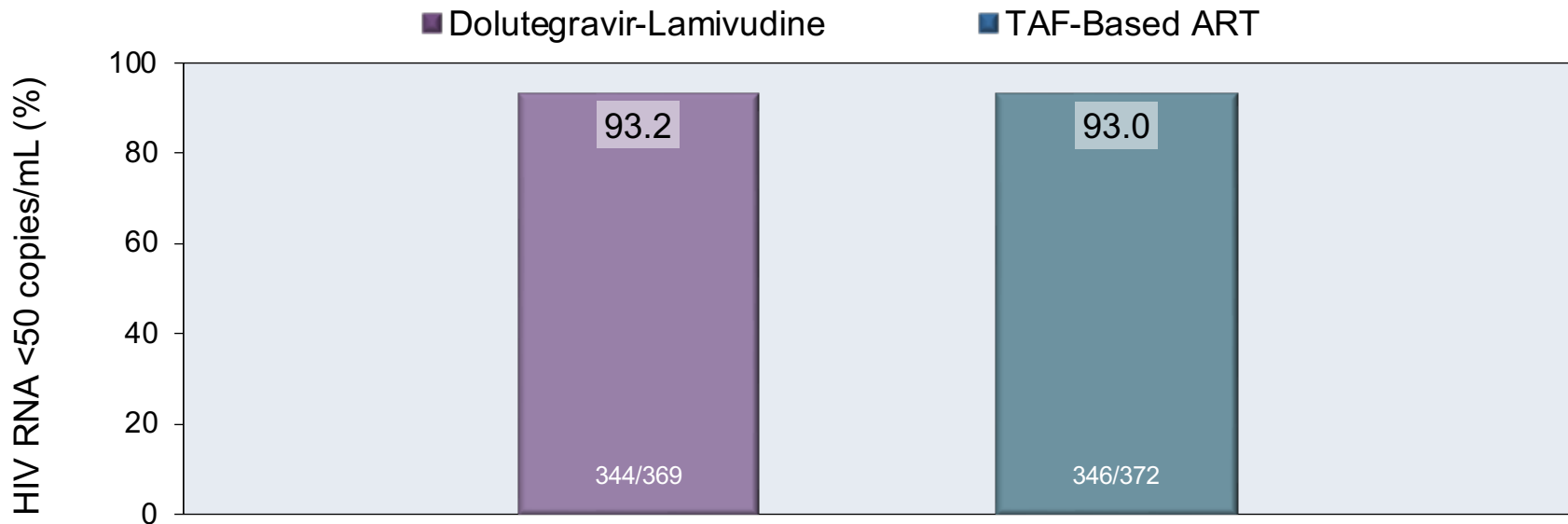
TANGO: Baseline Characteristics

Characteristic	Dolutegravir-Lamivudine (n = 369)	TAF-Based ART (n = 372)
Age, years, median (range)	40 (20-74)	39 (18-73)
Female, n (%)	25 (7)	33 (9)
White, n (%)	297 (81)	289 (78)
African American/African, n (%)	50 (14)	58 (16)
CD4 cell count <500, n (%)	98 (27)	74 (20)
CD4 cell count ≥500, n (%)	271 (73)	298 (80)
Months on ART, median (range)	33.8 (7.1-201.2)	35.1 (7.0-160.8)
Baseline third agent class		
INSTI	289 (78)	296 (80)
NNRTI	51 (14)	48 (13)
PI	29 (8)	28 (8)

Switch to DTG-3TC versus Continued TAF-Based Baseline Regimen

TANGO: Results at Week 48

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

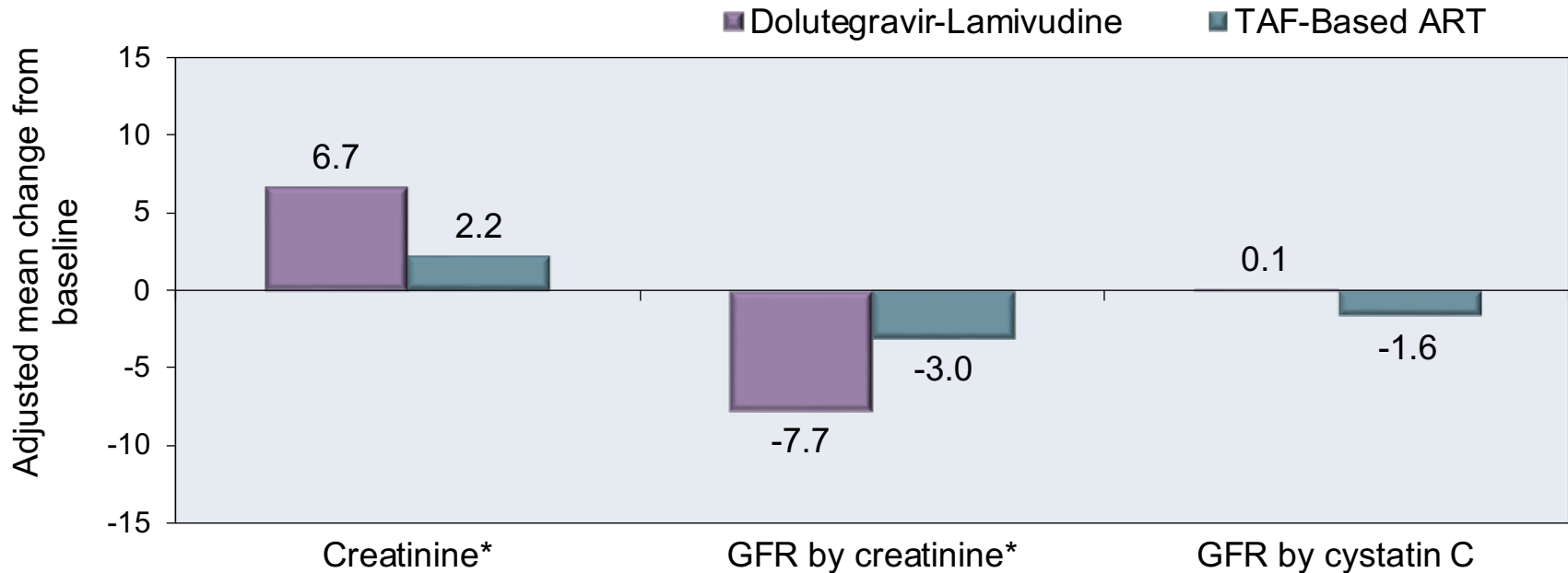


- Confirmed withdrawal for virologic failure: 0 in DTG/3TC arm, 1 in TAF-based ART arm
- No new resistance mutations occurred
- 4 with baseline M184V/I in DTG/3TC arm (by proviral genotype) suppressed at week 48

Switch to DTG-3TC versus Continued TAF-Based Baseline Regimen

TANGO: Results at Week 48

Week 48 Changes in Renal Function (Plasma/Serum Markers)

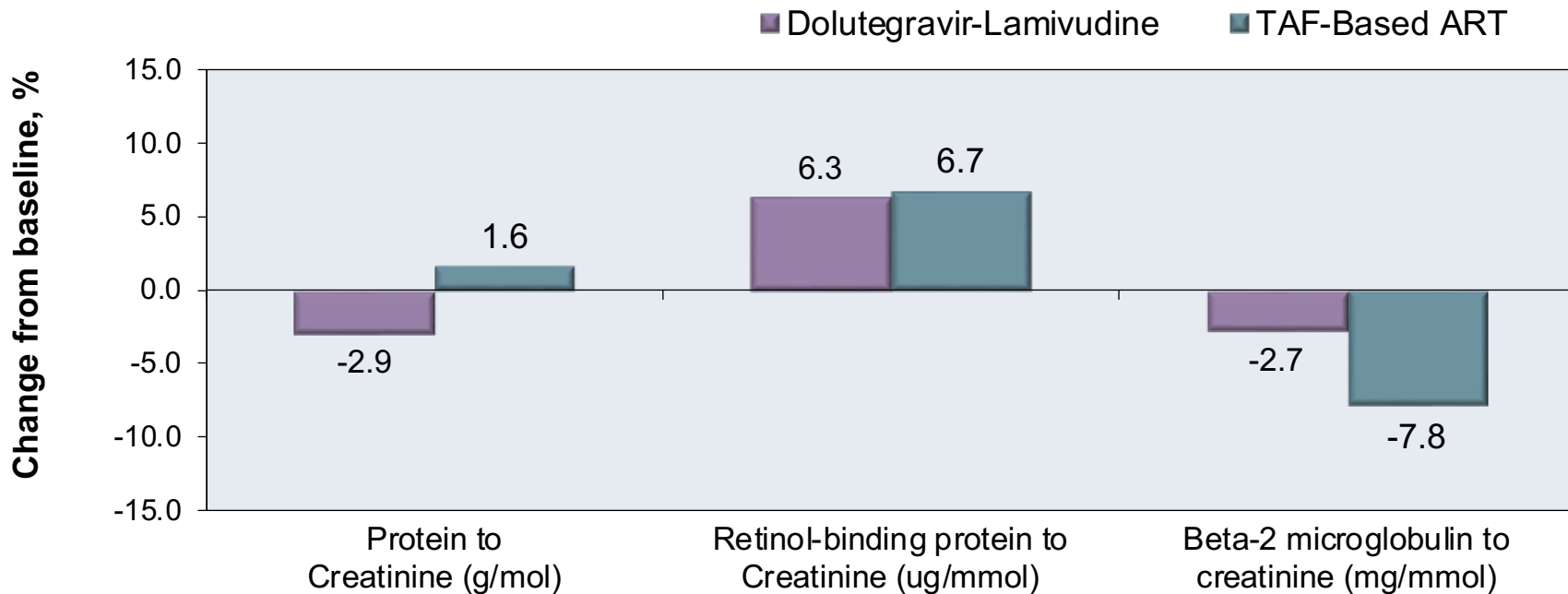


*Statistically significant difference

Switch to DTG/3TC vs Continued TAF-Based 3-Drug ART

TANGO: Results at Week 48

Week 48 Changes in Markers of Proximal Tubulopathy (Urine Tests)



Switch to DTG-3TC versus Continued TAF-Based Baseline Regimen

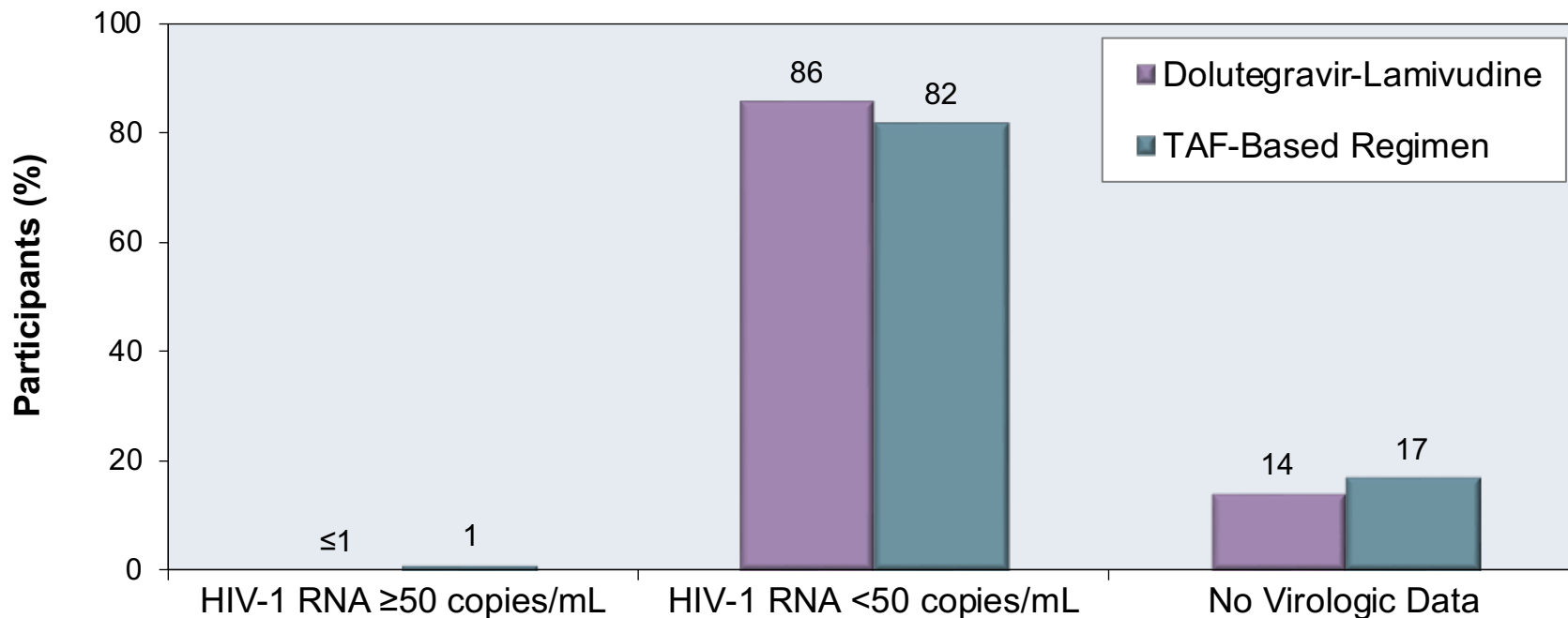
TANGO: Conclusions

Conclusion: “Dolutegravir-lamivudine was noninferior in maintaining virologic suppression vs a TAF-based regimen at week 48, with no virologic failure or emergent resistance reported with DTG/3TC, supporting it as a simplification strategy for virologically suppressed people with HIV-1.”

Switch to DTG-3TC versus Continued TAF-Based Baseline Regimen

TANGO: 144 Week Results

Week 144 Virologic Response (ITT-Exposed)



Switch to DTG-3TC versus Continued TAF-Based Baseline Regimen

TANGO: Conclusions

Conclusion: “The 2-drug regimen dolutegravir-lamivudine was non-inferior in maintaining virologic suppression vs a tenofovir alafenamide-based regimen at Week 48, with no virologic failure or emergent resistance reported in the dolutegravir-lamivudine group, supporting its use as a simplification strategy for virologically suppressed people living with HIV-1.”

Switch to DTG-3TC versus Continued 3- or 4-Drug ART
SALSA

Switch to DTG-3TC versus Continued 3- or 4-Drug Regimen

SALSA: Design

- **Design:** Open-label, non-inferiority trial in adults with suppressed HIV RNA while taking a 3- or 4-drug regimen, randomized to switch to fixed-dose dolutegravir-lamivudine (DTG-3TC) or continue baseline regimen
- **Inclusion Criteria**
 - Adults with suppressed HIV RNA ≥ 6 months
 - No history of virologic failure
 - No major NRTI resistance; no INSTI resistance
 - No Hepatitis B or C
- **Regimens**
 - Dolutegravir-lamivudine (50/300mg) daily
 - 3- or 4-drug baseline regimen

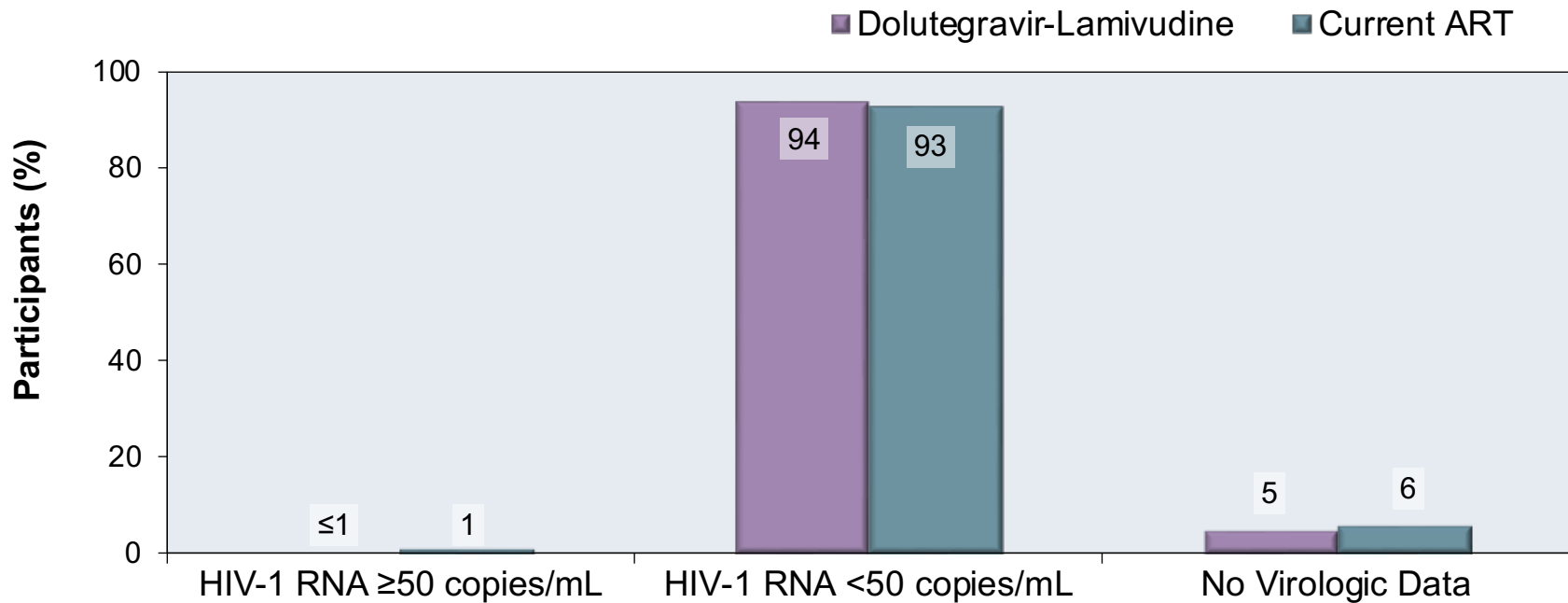
Switch Group
Dolutegravir-Lamivudine
(n = 246)

Continue Baseline Regimen Group
3- or 4-Drug Regimen
(n = 247)

Switch to DTG-3TC versus Continued 3- or 4-Drug Regimen

SALSA: 48 Week Results

Week 48 Virologic Response ITT-Exposed (Snapshot Analysis)



Switch to DTG-3TC versus Continued 3- or 4-Drug Regimen

SALSA: Conclusions

Conclusion: “Switching to dolutegravir-lamivudine was non-inferior to continuing current antiretroviral regimen for maintaining virologic suppression at Week 48 with no observed resistance, supporting the efficacy, good safety, and high barrier to resistance of dolutegravir-lamivudine.”

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.

