

TUPEB092

BICSTaR

Outcomes in Treatment-Experienced People With HIV and Detectable Viremia Switching to B/F/TAF in Routine Clinical Practice: 24-Month Results From the BICSTaR Study

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Conclusions

- In treatment-experienced people with HIV and uncontrolled viremia, switching to bicitegravir/emtricitabine/tenofovir alafenamide (B/F/TAF) was associated with high rates of virologic suppression and was generally well tolerated
- An increase towards the population norm in 36-Item Short Form Health Survey (SF-36) Mental Component Summary scores indicated improvements in mental wellbeing after switching to B/F/TAF, and participants reported increased satisfaction with HIV treatment

Plain Language Summary

- B/F/TAF is a once-daily tablet used to treat human immunodeficiency virus (HIV). It combines three medicines: bicitegravir (B), emtricitabine (F), and tenofovir alafenamide (TAF)
- The BICSTaR study looked at how well B/F/TAF worked and how safe it was for people with HIV in healthcare settings around the world
- In this part of the study, researchers focused on people who still had detectable HIV in their blood when they switched to B/F/TAF from other HIV medicines
- Researchers found that B/F/TAF was highly effective at reducing the amount of HIV in the blood, and most participants had undetectable HIV levels after 2 years of treatment
- People who switched to B/F/TAF had few side effects, which were mostly mild or moderate
- People reported that their mental wellbeing improved after switching to B/F/TAF
- Most people in the study said they were happier with their HIV treatment after switching to B/F/TAF

Introduction

- B/F/TAF is a single tablet regimen recommended in international clinical guidelines for people with HIV¹⁻³
- Since marketing approval, cumulative exposure to B/F/TAF is estimated to be 5,807,885 person-years⁴
- BICtegravir Single Tablet Regimen (BICSTaR) was a prospective, observational, 24-month cohort study evaluating the safety and effectiveness of B/F/TAF in people with HIV receiving real-world clinical care⁵
 - The study enrolled 2379 treatment-naïve and treatment-experienced people with HIV-1 from routine clinical practice across 14 countries⁵
 - The pooled analysis showed that B/F/TAF was highly effective and well tolerated through 24 months among a broad range of people with HIV-1⁵
- Multiple studies have demonstrated that B/F/TAF is effective at maintaining virologic suppression in treatment-experienced individuals who are virologically suppressed at the time of switching to B/F/TAF, but data are limited in those with active viremia at the time of switching⁶⁻⁸
- Here, we present data on the effectiveness, safety profile, and patient-reported outcomes through 24 months for people with HIV-1 who had detectable viremia at the time of switching to B/F/TAF

Objective

- To describe the effectiveness, safety profile, and patient-reported outcomes through 24 months in treatment-experienced people with HIV-1 with detectable viremia who switched to B/F/TAF during routine clinical care in the BICSTaR study

Methods

Study Design

