To assess the causality of adverse drug reactions (ADRs) of HIV-patients treated with BIC/FTC/TAF.

- The frequency of ADRs of HIV patients in treatment with BIC/FTC/TAF is low and most of people who suffer it can continue with their treatment.
- Most ADRs were consider as probably.
- The most common ADRs was the headaches, the gastrointestinal disorders and the insomnia.

Background and importance
Bictegravir/emtricitabine/tenofovir alafenamide (BIC/FTC/TAF) has been positioned as a preference drug in the main guidelines in the treatment of HIV. BIC/FTC/TAF has demonstrated an excellent safety and efficacy profile in pivotal studies.

AIM AND OBJECTIVES
To assess the causality of adverse drug reactions (ADRs) of HIV-patients treated with BIC/FTC/TAF.

Material and Methods
Observational and retrospective study from May 2019 to March 2021 in a general hospital.

Characterization of the population
Cohort 1: patients who changed their antirretroviral treatment due to an ADR.
Cohort 2: patients who maintained their antirretroviral treatment despite some ADR.

Naranjo Algorithm
To assess whether there is a causal relationship between an identified untoward clinical event and a drug.

>9 definite
5-8 probably
1-4 possible
0 doubtful

Results
Most common ADRs (Cohort 1)

Most common ADRs (Cohort 2)

Characterization of the population
N = 1,275 patients
Cohort 1: 27 women vs 25 men and median age 56 [IQR 51 – 60]
Cohort 2: 107 women vs 25 men and median age 45 [IQR 33 – 55]

Causality of ADRs (Cohort 1)

Causality of ADRs (Cohort 2)

Most common ADRs

- The frequency of ADRs of HIV patients in treatment with BIC/FTC/TAF is low and most of people who suffer it can continue with their treatment.
- Most ADRs were consider as probably.
- The most common ADRs was the headaches, the gastrointestinal disorders and the insomnia.