Objectives

- To assess the neurotoxicity associated with DTG in the treatment of human immunodeficiency virus infected patients (HIV +).
- To compare our results with those published in recent reports.

Methods

- Retrospective and Observational Study

Results

- 292 patients
- 16.78% discontinuation (87% of them during 1st year of treatment)

Concomitant ART

- Abacavir/Lamivudine 79.50%
- Tenofovir/Emtricitabine 10.20%
- Etravirine 6.30%
- Potentiated protease inhibitors 4%

Reasons for discontinuation (I)

- Insomnia 71.9%
- Nervousness 47.0%
- Asthenia 28.1%
- Anxiety 53.0%

Reasons for discontinuation (II)

- Others 55.50%
- Neuropsychiatric AEs 22.20%
- Paranoid ideas and nightmares 11.10%
- Dizziness 6.30%

Reversible AEs in 100% of patients after discontinuation

- 83.3% of patients were receiving Abacavir/Lamivudine treatment

Conclusion

- Early discontinuation of Dolutegravir from neurotoxicity was frequent, mainly in women and in patients who initiated Abacavir/Lamivudine at the same time, but not in elderly patients. Therefore, our results agree with those already published in recent reports.

- As Dolutegravir is one of the most commonly used antiretroviral options both in naive and pretreated patients, further research on their safety and neurotoxicity mechanisms are needed.

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