CONDITIONS OF USE OF ELVITEGRAVIR / COBICISTAT / EMTRICITABINE / TENOFOVIR IN PATIENTS WITH HIV


**BACKGROUND:** Since 1981, year of the first case of infection with human immunodeficiency virus (HIV) / AIDS, about 60 million people have been infected by the virus, and some 20 million have died. But since the appearance in 1995 of the so-called highly active antiretroviral therapy there have been dramatic reductions observed in the morbidity and mortality rates.

**PURPOSE:** Evaluate the use of elvitegravir / cobicistat / emtricitabine / tenofovir (EVG / COBI / FTC / TDF) in patients with HIV and check the adequate prescription as indicated by the HIV Therapy Group of the regional Pharmacy and Therapeutics Committee in their document "Terms of Use of EVG / COBI / FTC / TDF".

**MATERIALS AND METHODS:** Retrospective observational study in tertiary hospital. Using the pharmaceutical management software program Savac®, the total of patients receiving EVG / COBI / FTC / TDF from October 2014-October 2015 (approved use in the hospital) was obtained. The medical record program Selene® provided the following data: age, sex and previous comorbidities. Before initiating a naïve or switch treatment with EVG / COBI / FTC / TDF, the use was approved following the guidelines prepared by the HIV Therapy Group.

**RESULTS:** 28 patients, 19 (68%) men and 9 (32%) women with a mean age of 49 were included in the study. 5 naïve patients were identified and the rest were treatment changes.

The most common previous treatment schemes were: tenofovir + efavirenz (25%), tenofovir + etravirine (14.3%) tenofovir darunavir + ritonavir (7%), lopinavir / ritonavir + tenofovir (7%).

The most common comorbidities inducing treatment switch were:

- HCV
- Dyslipidemia
- Hypertension
- Hypercholesterolemia
- Adherence problems
- Vitamin D deficiency

**CONCLUSIONS:** According to the document prepared by the regional HIV Therapy Group, it’s use is preferable in non-compliant patients, prioritizing simplicity to prevent selected resistance. In our study, the most common comorbidity that leads to its use as treatment is the HCV. The start or change treatment with EVG / COBI / FTC / TDF complied to the document prepared by the HIV Group in all cases.

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