Dolutegravir Regimen Bests Atripla as First-Line HIV Therapy

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Dolutegravir, an experimental once-daily integrase inhibitor being developed by ViiV Healthcare and Shionogi, combined with Epzicom (abacavir plus lamivudine), appears to have an efficacy advantage over Atripla (efavirenz plus tenofovir and emtricitabine) among people starting HIV treatment for the first time. According to data from the 830-person Phase III SINGLE clinical trial presented at the 52nd Interscience Conference on Antimicrobial Agents and Chemotherapy (ICAAC) in San Francisco, 88 percent of volunteers using dolutegravir and Epzicom, compared with 81 percent of those using Atripla, had undetectable viral loads after 48 weeks of treatment—a statistically significant difference—though this was primarily driven by a higher rate of discontinuations in the Atripla group because of side effects. Whereas those in the Atripla group were more likely to experience central nervous system-related side effects, insomnia was more common among those in the dolutegravir group. A one-daily single table combining dolutegravir, abacavir and lamivudine, currently dubbed 572-Trii, is in development.

To review the 52nd ICAAC abstract, click here.

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