Tivicay Has Top Dropout Rate Due to Neuropsychiatric Effects Among Integrase Inhibitors

This is according to a French study looking at discontinuations of Tivicay compared with Vitekta and Isentress.

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Among the three integrase inhibitors, Tivicay has the highest rate of discontinuation due to neuropsychiatric side effects, aidsmap reports.

Tivicay is included in Triumeq (dolutegravir/abacavir/lamivudine) and Juluca (dolutegravir/rilpivirine).

Presenting their findings at the International AIDS Conference in Amsterdam (AIDS 2018), French researchers analyzed data on 21,315 people treated for HIV at 18 centers in France, looking at treatment discontinuations among those receiving integrase inhibitors between 2006 and 2016. A total of 6,274 of the cohort received Tivicay, 3,421 received Vitekta (elvitegravir) and 11,620 received Isentress (raltegravir).

Vitekta is included in Genvoya (elvitegravir/cobicistat/emtricitabine/tenofovir alafenamide) and Stribild (elvitegravir/cobicistat/emtricitabine/tenofovir disoproxil fumarate).

Of those on Tivicay, Vitekta and Isentress, a respective 786; 691; and 5,910 discontinued each drug, with a respective 21.9 percent, 6.5 percent and 3.5 percent doing so because of neuropsychiatric side effects, such as insomnia, anxiety or depression.

Overall, 2.7 percent of those on Tivicay stopped the drug because of neuropsychiatric side effects, compared with 1.3 percent of those on Vitekta and 1.7 percent of those on Isentress.

After adjusting the data for various factors, the researchers found that those taking Tivicay were 2.27 times more likely to stop treatment with the integrase inhibitor compared with those taking Vitekta and 2.46 times more likely to stop compared with those taking Isentress. People who started on one of the integrase inhibitors after switching from a previous antiretroviral regimen were 1.57 times more likely to stop treatment due to neuropsychiatric effects, compared with those who were starting HIV treatment for the virus time. Those with a previous history of stopping treatment due to neuropsychiatric effects were 1.36 times more likely to do so again after taking one of the three integrase inhibitors, compared with those with no such history.

To read the aidsmap article, click here.

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