

# SWITCHING TO BICTEGRAVIR/EMTRICITABINE/TENOFOVIR ALAFENAMIDE (B/F/TAF) IN TREATMENT-EXPERIENCED (TE) PEOPLE WITH HIV (PWH) WITH BASELINE SYMPTOMS OF DEPRESSION, ANXIETY OR INSOMNIA (DAI) IN THE OBSERVATIONAL BICSTaR STUDY

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## Background:

Neuropsychiatric disorders are common among PWH. Data on integrase strand transfer inhibitor use in people with neuropsychiatric disorders are limited. We describe outcomes in TE PWH with DAI at baseline (BL) switching to B/F/TAF in the real-world BICSTaR observational cohort study.

## Methods:

We included data from PWH with DAI (according to BL comedication[s]; BL-DAI) from BICSTaR cohorts (Europe/Canada/Israel). Outcomes up to 24 months (M) included: virologic effectiveness (HIV-1 RNA <50 copies/mL; missing=excluded); initiation/change/stopping of DAI comedication(s); drug-related DAI-related adverse events (DAI AEs) (according to MedDRA classification); patient-reported outcomes (symptoms, quality of life [QoL], treatment satisfaction).

## Results:

Of 822 PWH with 24M data, this analysis included 123 (15%) who had BL-DAI. 85% were male; 85% were White; median age was 52 years.

At 24M, 120 (98%) BL-DAI participants were still on ≥1 BL DAI medication. New DAI medications (in addition to BL-DAI) were started in 16 (13%). 8 (7%) changed their DAI medications. 3 (2%) stopped all DAI medications.

Virologic effectiveness remained high through 24M.

DAI AEs occurred in 26 (21%) participants with BL-DAI, of whom 19 (73%) only had AEs that were not considered drug related. 7 (6%) participants had drug-related DAI AEs; these resolved in 5 participants (in 2 participants, they resolved on switching

antiretroviral treatment [ART]). 4 (3%) participants had drug-related DAI AEs leading to B/F/TAF discontinuation (switched to another ART). There were no drug-related, serious DAI AEs.

There was no worsening of three self-reported symptoms associated with DAI over the course of B/F/TAF treatment, or in physical/mental QoL. Treatment satisfaction increased through 24M (no statistical testing).

**Conclusion:**

In this cohort of PWH with BL-DAI switching to B/F/TAF, virologic effectiveness remained high through 24M, with few discontinuations due to drug-related DAI-related AEs. Self-reported mental health remained stable. These real-world data support B/F/TAF use in this population.

**Disclosure of Interest Statement:**

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