Introduction

- Fostemsavir (FTR) is a prodrug metabolized to tamsivir (TMR), a first-in-class attachment inhibitor that binds to the HIV-1 envelope gp120, preventing entry into CD4+ cells via the chemokine CCR5 receptor.

Methods

- Virologic response (HIV-1 RNA <40 c/mL, by Snaphshot analysis) through Week 96 in the RC was analyzed with the initial OBT genotypic, phenotypic, and overall susceptibility scores (GSS, PSS, OSS, OSS new) and by number of fully active and available ARVs (FAA) (Figure 3).

- The strongest correlation for increased rates of virologic response was with increasing baseline OSS new (Figures 6 and 7).

- This trend was less pronounced for OSS and inconsistent for PSS, OSS old, and GSS.

Results

- The RC included 272 participants (Table 1), most of whom included 1 or 2 FAA ARVs in their initial OBT (Figure 4).

- Dolutegravir was the most common ARV included in the initial OBT (Figure 5).

- The strongest correlation for increased rates of virologic response was with increasing baseline OSS new (Figures 6 and 7).

- This trend was less pronounced for OSS and inconsistent for PSS, OSS old, and GSS.

Conclusions

- Long-term virologic responses in an HTE population receiving FTR-based cART may be better predicted by considering a combination of available resistance results plus prior ARV exposure (OSS new) rather than resistance measures alone (GSS, PSS, or OSS).

- Among the most common ARVs in the initial OBT, inclusion (vs non-inclusion) of dolutegravir with an OSR or OSR new of 1 yielded the greatest difference in virologic response.

- The correlation between OSS new and virologic outcomes in individuals with MDR HIV-1 is consistent with that seen in studies conducted in similar populations. 10

Acknowledgments

- Monogram Biosciences, Inc. provided support for travel and accommodation for the study investigators and their families, and the BRIGHTE investigations. ViiV Healthcare and GlaxoSmithKline, Antivirals Drug, and Eudendrocousine, Barcelona contribute to the BRIGHTE investigations. Professional medical writing and editorial assistance was provided by Sthenison Hase and Amuko and Tokemoni, London.

References