Tolerability of central nervous system symptoms among HIV-1 infected efavirenz users: analysis of patient electronic medical record data

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BACKGROUND

More than 1.2 million people in the United States are living with human immunodeficiency virus (HIV).1 Adherence to antiretroviral therapy (ART) is vital in preventing HIV-related morbidity and mortality.2-6 Efavirenz (EFV, Sustiva) is a non-nucleoside reverse transcriptase inhibitor (NNRTI) indicated for the treatment of HIV type 1 (HIV-1).7-9 Approved in the U.S. in 1998, EFV was first recommended with tenofovir disoproxil fumarate (TDF) and lamivudine (3TC) as a regimen for initial therapy of HIV infection in the 2003 Department of Health and Human Services (DHHS) Guidelines.10 Efavirenz (EFV, Sustiva) is a non-nucleoside reverse transcriptase inhibitor (NNRTI) indicated for the treatment of HIV-1 infected patients.11 Treated with 1st-line regimen including Sustiva or Atripla (first day of treatment initiation is the index date) Exclusion criteria: Age >12 years Any enrollment gap in the period from 6 months post-index to 12 months post index

RESULTS

New onset CNS-related symptoms after EFV initiation

50% of patients on EFV (n=174) reported at least one CNS-related symptom during the one year follow-up period (Figure 1). Of these, 19 discontinued therapy due to CNS-related symptoms. EFV discontinuation

16.2% (282/1,742) of new users discontinued EFV over one year of follow-up (Table 2). Discontinuation was 30.0% (100/333) among Sustiva users and 12.9% (182/1,409) among Atripla users. 57.1% (161/282) of new users who discontinued EFV had no CNS-related symptoms recorded in the 30 days prior to their discontinuation of EFV.

DISCUSSION

We found that reports of CNS symptoms and discontinuation occurred about 4 months after EFV initiation. Consistent with a large prospective cohort analysis (N=1381), we observed a lower trend of EFV discontinuation due to CNS-related symptoms. Many discontinuations occurred for unknown reasons or were thought to be unrelated to EFV use.

REFERENCES


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