Adherence in Antiretroviral Treatment-Naïve Subjects Treated With Once-Daily Atazanavir/Ritonavir or Twice-Daily Lopinavir/Ritonavir, Both in Combination With Tenofovir/Emtricitabine: 48 Week Results From the CASTLE Study

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ABSTRACT

The CASTLE study was a 96-week, randomized, open-label study comparing ATV/RTV with LPV/RTV, both in combination with tenofovir/emtricitabine (TDF/FTC). Adherence was assessed using the Multicenter AIDS Cohort Study questionnaire. The proportion of patients with complete adherence to assigned regimen was assessed from Week 4 through Week 48 for treated patients with evaluable results.

RESULTS

- Adherence was comparable in both treatment arms throughout the study.
- Adverse events and treatment discontinuations were similar in both treatment arms.

CONCLUSIONS

- Adherence was high in both treatment arms.
- The Multicenter AIDS Cohort Study (MACS) adherence questionnaire was used to assess patient adherence.
- Adherence was defined by comparing actual study medications received to those reported on MACS at each visit.

REFERENCES


INTRODUCTION

- The objective of this study was to evaluate patient-reported adherence on a once-daily ATV/RTV and a twice-daily LPV/RTV regimen.

METHODS

- The CASTLE study was a 96-week, randomized, open-label study comparing ATV/RTV with LPV/RTV, both in combination with tenofovir/emtricitabine (TDF/FTC). Adherence was assessed using the Multicenter AIDS Cohort Study questionnaire. The proportion of patients with complete adherence to assigned regimen was assessed from Week 4 through Week 48 for treated patients with evaluable results.

RESULTS

- Baseline demographics were similar across both treatment arms (Table 1).
- Adherence was comparable in both treatment arms throughout the study.
- Patient discontinuations due to adverse events prior to Week 48 were 2% (10/441) and 3% (14/437) in the ATV/RTV and LPV/RTV treatment arms, respectively.

CONCLUSIONS

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