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Optimized Antiretroviral Therapy with Darunavir/Ritonavir, Etravirine and/or Raltegravir: A Salvage Therapy Option in HIV-1 Infected Patients with Long-Term Therapeutic Failures, about 23 Cases

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ABSTRACT

Objectives: The aims of this study was to analyze the immuno-virologic response after optimised background antiretroviral therapy (OBT) associated to new active antiretroviral treatment (ART) in HIV-1 infected patients with chronic virologic failure. **Methods:** We conducted a descriptive analysis of the immuno-virologic responses in HIV-1 adult infected patients: 1) harbouring multiple therapeutic failures with ART; 2) with no virologic response obtained over 10 years (1997-2008); and 3) treated with OBT combined with new drugs including at least 1 of the 3 active ART among darunavir/ritonavir, etravirine and raltegravir; 4) observed between month 0 (M0), before new ART to month 12 (M12) after new ART initialisation. **Results:** Twenty three patients were included in the study. After OBT, the proportion of patients with undetectable viral load was significantly higher at M6 and M12 than M0 (86% and 73% versus 0%, $p = 0.03$, respectively). At the same period, the median HIV viral load decreased significantly in 19/23 (83%) patients from 4.3 to 1.69log₁₀ HIV-1 RNA copies/ml ($p < 0.001$, respectively). The median CD4-T cells count increased significantly from 171/mm³ [0 - 604] to 449/mm³ [130 - 964] between M0 and M12 ($p < 0.001$), while the proportion of patients with CD4-T cells count below 200/mm³ decreased from 57% to 23% ($p = 0.02$). Tolerability was good and no death was recorded during the 12-month' follow-up. **Conclusions:** These results show that the combination of OBT with the new ART can offer a salvage therapy in patients presenting a long-term history of virologic failures.

KEYWORDS

Darunavir/Ritonavir; Etravirine; Raltegravir; HIV-1

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