Antiretroviral Therapy (ART) in Clinical Practice: Ethnic Variability in Effectiveness and Tolerability of Nelfinavir and Two Nucleoside Reverse Transcriptase Inhibitors

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Antiretroviral Therapy in Clinical Practice: Ethnic Variability in Effectiveness and Tolerability of Nelfinavir and Two Nucleoside Reverse Transcriptase Inhibitors

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ABSTRACT

Background: Recent studies reveal patients in clinical practice achieve viral suppression less frequently than those in clinical trials**. Many variables influence the discrepancy, including ethnicity. This study examines ethnic variability in the effectiveness and tolerability of nelfinavir (NFV) and two nucleoside reverse transcriptase inhibitors (NRTIs) in an urban HIV practice.

Methods: Retrospective chart review of all patients (N=57) seen at Rommel Internal Medicine (IRM) after April 1997 yielded 57 patients on NFV and two NRTIs. Viral load responses were evaluated by percentage of patients <400 (copies/mL) by week 16 and <50 (<P<400) by week 24, of those with ultrasensitive (UQ) data. Other studies have shown this to be predictive of long-term durability***.

Results: Patients analyzed (N=57) were: White 18 (31.6%), Black 22 (38.6%), Hispanic 17 (30.5%). Most patients were on BID NFV and AZT/3TC (59.6%), AZT/3TC (26.3%) and D4T/3TC (14.0%).

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;400 by 16</td>
<td>11/18 (61%)</td>
<td>7/22 (32%)</td>
<td>3/17 (18%)</td>
<td>21/52 (40.4%)</td>
</tr>
<tr>
<td>&lt;P&lt;400 by 16</td>
<td>6/18 (33%)</td>
<td>5/22 (23%)</td>
<td>1/17 (6%)</td>
<td>12/57 (21.2%)</td>
</tr>
</tbody>
</table>

% of patients <50 by week 24 in based only on patients with UQ data. Most discontinuations were not due to AEs. Only 5 of 37 discontinued because of intolerable diarrhea.

CONCLUSIONS

• All ethnic subgroups in this study exhibited virologic success rates (JIT) much lower than would be expected, based on previous data from clinical trials.

• Although diarrhea was the most common AE reported (affecting White patients twice as frequently as Hispanic patients), it was easily controlled. Only five patients discontinued to Potent Antiretroviral Therapy. AIDS. 1999;13:1873-80.

• The majority of discontinuations were due to AEs, but to external factors. This further investigation of this discrepancy between success rates in clinical practice vs. clinical trials should be further examined.


** Many variables influence the discrepancy, including ethnicity. This study examines ethnic variability in the effectiveness and tolerability of Nelfinavir (NFV) and two nucleoside reverse transcriptase inhibitors (NRTIs) in an urban HIV practice.

*** The frequency with which patients achieve viral suppression in clinical practice is often lower than that observed in clinical trials. Many variables influence the discrepancy, including ethnicity. This study examines ethnic variability in the effectiveness and tolerability of Nelfinavir (NFV) and two nucleoside reverse transcriptase inhibitors (NRTIs) in an urban HIV practice.

REFERENCES


ACKNOWLEDGEMENTS

Thanks to Judy Lash, Allison Stapler, Janis Goodwin, Joyce Woll and John Allen.