# Guideline for Antiretroviral Therapy (ART) Regimens for Initial Therapy and for Switching ART in Virologically Stable Suppressed Adults

The following represents the BC-CfE ART regular formulary options for initial therapy, as of the Summer 2020. The formulary takes into consideration both the recommendations of the CDET's Scientific Review of the available evidence and cost considerations, including the real bulk purchase costs to the BC-CfE program. Prescribers are reminded that the generic version of ART drugs will be preferentially used, where possible. As an additional cost-containment measure, eligible participants may be offered voluntary de-simplification (e.g. from a single tablet regimen to a 2-tablet once daily regimen of the same drugs) if deemed clinically appropriate.

The ART regimens listed below for initial therapy are available as regular drug formulary benefits through the BC-CfE Drug Treatment Program. The regimens are presented in hierarchical order based on cost-benefit considerations. Prescribers are encouraged to consider the various ART regimens for initial therapy in the hierarchical order as presented under Options (Regular drug formulary benefit), recognizing that the cost range between regimens at the top of the list (most favourable cost-benefit) and those at the bottom of the list is greater than 5-fold. The cost gap is even greater for regimens not listed below (least favourable cost-benefit). Prescribers who may wish to use regimens other than those listed below will be expected to justify their choice with appropriate supportive documentation accompanying the BC-CfE prescription request form.

**ART Regimens for Initial Therapy – Listed in hierarchical order based on cost-benefit**

| REGIMEN DRUG CLASS | OPTIONS (REGULAR DRUG FORMULARY BENEFIT) | PILLS/ DAY | FOOD REQUIREMENT | COST-BENEFIT |
|---|---|---|---|---|
| PI | ***Atazanavir*** + ritonavir + ***abacavir/lamivudine***[a,b] | 3 | Y | +++ |
| PI | ***Atazanavir*** + ritonavir + ***emtricitabine/tenofovir DF*** | 3 | Y | +++ |
| PI | ***Darunavir*** + ritonavir + ***abacavir/lamivudine***[a,b] | 3 | Y | +++ |
| PI | ***Darunavir*** + ritonavir + ***emtricitabine/tenofovir DF*** | 3 | Y | +++ |
| NNRTI | ***Efavirenz/emtricitabine/tenofovir DF*** | 1 | N | +++ |
| InSTI | Dolutegravir/lamivudine[c,d,e] | 1 | N | ++ |
| InSTI | Dolutegravir[c] + ***abacavir/lamivudine***[a] | 2 | N | ++ |
| InSTI | Dolutegravir[c] + ***emtricitabine/tenofovir DF*** | 2 | N | ++ |
| InSTI | Bictegravir/emtricitabine/tenofovir alafenamide | 1 | N | + |

Drugs in ***bold italics*** are generic products

[a]abacavir use contraindicated if HLA-B*57:01 allele positive

[b]regimen acceptable if baseline HIV plasma viral load <100,000 copies/mL

[c]avoid in individuals who are pregnant and within 12 weeks post-conception; who are of childbearing potential and planning to become pregnant; or who are of childbearing potential, sexually active, and not using effective contraception

[d]acceptable as initial regimen if baseline pVL <500,000 c/mL, CD4 count >200 cells/mm3, no resistance to dolutegravir or lamivudine, *and* absence of hepatitis B (HBV) chronic infection

[e]acceptable as switch option if no resistance to dolutegravir or lamivudine, no previous virologic failure to NRTIs or INSTIs, virologically suppressed >6 months, *and* absence of HBV chronic infection

In the event where ART regimen switch is being considered in virologically suppressed individuals with no history of ARV drug resistance mutations or allergy/intolerance to specific agents, the above ART regimen options should be considered. When considering regimen change in cases of virologic failure, seeking expert advice is recommended.

A complete list of drugs available through the BC-CfE Drug Treatment Program can be found at https://bccfe.ca/publications/centre-documents/hivaids-drugs-available-through-bc-cfe