17 October 2024

Regarding two new sub-projects under the EuroSIDA study

Dear Colleagues,
The EuroSIDA steering committee has approved two new five year-long cohort studies, nested within the EuroSIDA study. The two studies are related and look at EuroSIDA participants who receive treatment with injectable long-acting (LA) cabotegravir (CAB) + long-acting rilpivirine (RPV) after December 17, 2020.

1) "Drug Utilization, Adherence, Effectiveness and Resistance: A Prospective Observational Cohort Study in People Living with HIV (PLWH) Initiating ARV Regimen CAB+RPV LA in Collaboration with EuroSIDA" (Cabotegravir+Rilpivirine Utilization Study)

2) "A Prospective Observational Cohort Study to monitor for hepatotoxicity and regimen discontinuation due to liver related adverse events among People with HIV, Initiating Cabotegravir + Rilpivirine regimens" (Cabotegravir+Rilpivirine Hepatotoxicity Study)

In the Cabotegravir+Rilpivirine Utilization Study, the aims are to:

a) Describe CAB+RPV LA containing regimens usage patterns
b) Assess adherence, durability and discontinuation for persons starting CAB+RPV LA regimen
c) Assess the clinical effectiveness (i.e. proportion of individuals experiencing virologic failure) among people who initiate CAB+RPV LA regimen
d) Monitor for resistance and next treatment response among individuals who switched off CAB+RPV LA regimen, where viral load data are available and resistance testing has been done as part of routine clinical practice

In the Cabotegravir+Rilpivirine Hepatotoxicity Study, the aims are to:

a) Characterize the rates and risks of hepatotoxicity following the initiation of CAB+RPV, oral 2-drug regimens dolutegravir + rilpivirine (DTG + RPV) **or** dolutegravir + lamivudine (DTG + 3TC) by:
- estimating the incidence of alanine aminotransferase elevations and risk factors for elevations
- estimating the incidence of cases of combined alanine aminotransferase and total bilirubin elevations and risk factors for elevations

b) Estimate the number of individuals discontinuing CAB+RPV, DTG+RPV **or** DTG+3TC regimens due to any reason and specifically discontinuations due to liver-related adverse events

The two oral 2-drug regimens serve as a control group to the CAB + RPV group.

Rigshospitalet
CHIP, Section 2100
Blegdamsvej 9
DK-2100 Copenhagen Ø, Denmark
Tel: +45 35 45 57 57
Fax: +45 35 45 57 58
Web: www.regionh.dk www.chip.dk

Data will be collected in two separate REDCap forms:

1. **"EuroSIDA Event Form for use of long-acting cabotegravir+rilpivirine"**
   The form should be completed for all EuroSIDA participants who start treatment with a CAB + RPV LA regimen at any time incl. participants who have received CAB + RPV in clinical trials.

   First data collection occurred between 15th of October – 1st of December 2021. The form should be updated once annually as long as the participant is receiving LA CAB+RPV. All injections until 24 months and six weeks after initiating LA will be collected.

   The form will be reimbursed 100 Euro for the first data collection and each annual update.

2. **"EuroSIDA hepatotoxicity event form"**
   The form should be completed for all EuroSIDA participants who have discontinued CAB+ RPV (either LA or lead-in therapy) or an oral 2-drug regimen with DTG+RPV **or** DTG+3TC due to due to liver related events, any possible liver toxicity, other causes or unknown.

   The form will be reimbursed 50 Euro.

   A MOOP will be generated and uploaded to the website.

Funding
The two studies are funded by the pharmaceutical company ViiV Healthcare Ltd.

If you have any questions, do not hesitate to contact us at the EuroSIDA Coordinating Center at eurosida.rigshopsitalet@regionh.dk

On behalf of the EuroSIDA Coordinating Centre,

Jakob Friis Larsen
Project Manager

Lars Peters
Study lead, MD, DMSc.

Malalai Gardizi
Project Coordinator