**Background.** Used in conjunction with other antiretroviral drugs, integrase strand transfer inhibitors (INSTIs) are highly effective and well tolerated. First licensed in 2007, guidelines have recommended their use as an option for initial treatment of HIV since 2009. Here we examine factors associated with INSTI use.

**Methods.** Data on people living with HIV (PLWH) who were newly initiated on antiretroviral therapy (ART) was extracted from the Truven Health MarketScan data base for commercially insured and Medicaid covered adults between January 1, 2008 and December 30, 2015. New users were identified as those without an ART claim in the 6 months preceding study inclusion. Multivariable logistic regression was pre-

**Results.** Between 2008 and 2015, 25,928 new initiators of ART were identi-

**Conclusion.** Despite their good safety profile and recommendation for first-line treatment, a significant proportion of PLWH were initiated on non-INISI-based regi-

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557. Evaluation of Clinical Response of a Two Tablet Once Daily Antiretroviral Regimen in Antiretroviral Experienced HIV-Infected Patients

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**Session:** 60: HIV: Antiretroviral Therapy

**Thursday, October 4, 2018: 12:30 PM**

**Background.** The benefits of antiretroviral therapy (ART) are compromised by virologic failure and drug resistance. To maintain virologic suppression, these patients have traditionally required multitablet “salvage” regimens. We retrospectively analyzed data on two tablet, once daily combination of Elvitegravir/Cobicistat/Emtricitabine/Tenofovir (GG) and Dolutegravir/Tenofovir/Emtricitabine (SC) in HIV-infected adults with his-

**Methods.** Electronic Medical Records of HIV-infected adults with history of prior resistance and regimen failure in our HIV-clinic were analyzed to assess efficacy of a two-tablet ART regimen of GG/SC. Efficacy was defined as percentage of partici-

**Results.** Thirty-four patients were included in the study, of which 70.6% were men, majority MSM: 64.7%. Patients had been diagnosed with HIV for a median of 13.8 ± 7.3 years. More than 50% of patients at time of switch were on four pills and 53% were on a BID regimen. 61.7% patients were virologically suppressed with the regi-

**Conclusion.** Despite the small numbers of patients, our results demonstrate that in a clinical setting a two tablet regimen provides substantial efficacy in ART-

**Disclosures.** All authors: No reported disclosures.

559. Efficacy and Tolerability of Integrase Inhibitors: Experiences From a Nationwide Real-Life Cohort

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**Session:** 60: HIV: Antiretroviral Therapy

**Thursday, October 4, 2018: 12:30 PM**

**Background.** The integrase strand transfer inhibitors (INSTIs) are widely used in first-line and alternative antiretroviral therapy. Observational studies have doc-

**Methods.** Prospectively collected cohort data of INSTI use were analyzed between January 2008 and March 2017, in Hungary, a Central-European country with centralized HIV care. Efficacy of viral suppression and reasons for discontinuation were evaluated for available INSTIs (raltegravir (RAL) and dolutegravir (DTG)).

**Results.** There were 2,232 patients registered in the National HIV Center in 2017 March 31. Six hundred seventeen patients received during the study period RAL (259 patients—41.9%) or DTG (358—58.1%). There were 55 cases (9%) of switch within class 39 patients for simplification, 13 due to toxicity, two virological failures, and one other reason. Thirteen cases (3%) changed INSTI to another class (eight virological failures, four due to toxicity, and four other reasons). Ten cases of virological failure occurred in patients taking RAL, whereas none of those taking DTG, but in patients on DTG higher rates of side effects were observed compared on patients with RAL (11% vs. 6% vs. 2.3%, respectively).

**Conclusion.** Large and homogenous, nationwide cohort of patients taking INSTIs confirm good tolerability and excellent efficacy of the class with slight differ-

**Disclosures.** All authors: No reported disclosures.