The Protease Inhibitor Monotherapy Versus Ongoing Triple Therapy (PIVOT) trial: a randomised controlled trial of a protease inhibitor monotherapy strategy for long-term management of human immunodeficiency virus infection

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Record Status
This is a bibliographic record of a published health technology assessment from a member of INAHTA. No evaluation of the quality of this assessment has been made for the HTA database.

Citation

Authors' objectives
To compare the effectiveness, toxicity profile and cost-effectiveness of protease inhibitors (PIs) monotherapy with those of standard-of-care triple therapy in a pragmatic long-term clinical trial. Standard-of-care antiretroviral therapy (ART) for human immunodeficiency virus (HIV) infection uses a combination of drugs, until now considered essential to minimise treatment failure and development of drug resistance. PIs are potent with a high genetic barrier to resistance and have the potential for use as monotherapy after viral load (VL) suppression achieved on combination therapy. However, longer-term resistance and toxicity risks are uncertain.

Authors' conclusions
PI monotherapy, with prompt reintroduction of combination therapy for VL rebound, was non-inferior to combination therapy in preserving future treatment options and is an acceptable and cost-effective alternative for long-term management of HIV infection.

Project page URL
http://www.nets.nihr.ac.uk/projects/hta/0640390

Final publication URL
http://www.journalslibrary.nihr.ac.uk/hta/hta20210/#/abstract

Indexing Status
Subject indexing assigned by CRD

MeSH
Humans; HIV Infections; Protease Inhibitors; Ritonavir

Language Published
English

Country of organisation
England

English summary
An English language summary is available.

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AccessionNumber
32016000564

Date abstract record published
22/03/2016