

## P251. RISK OF OCCULT HEPATITIS B VIRUS (HBV) INFECTION REACTIVATION IN PATIENTS RECEIVING ABC/3TC/DTG OR FTC/TAF/EVG/C



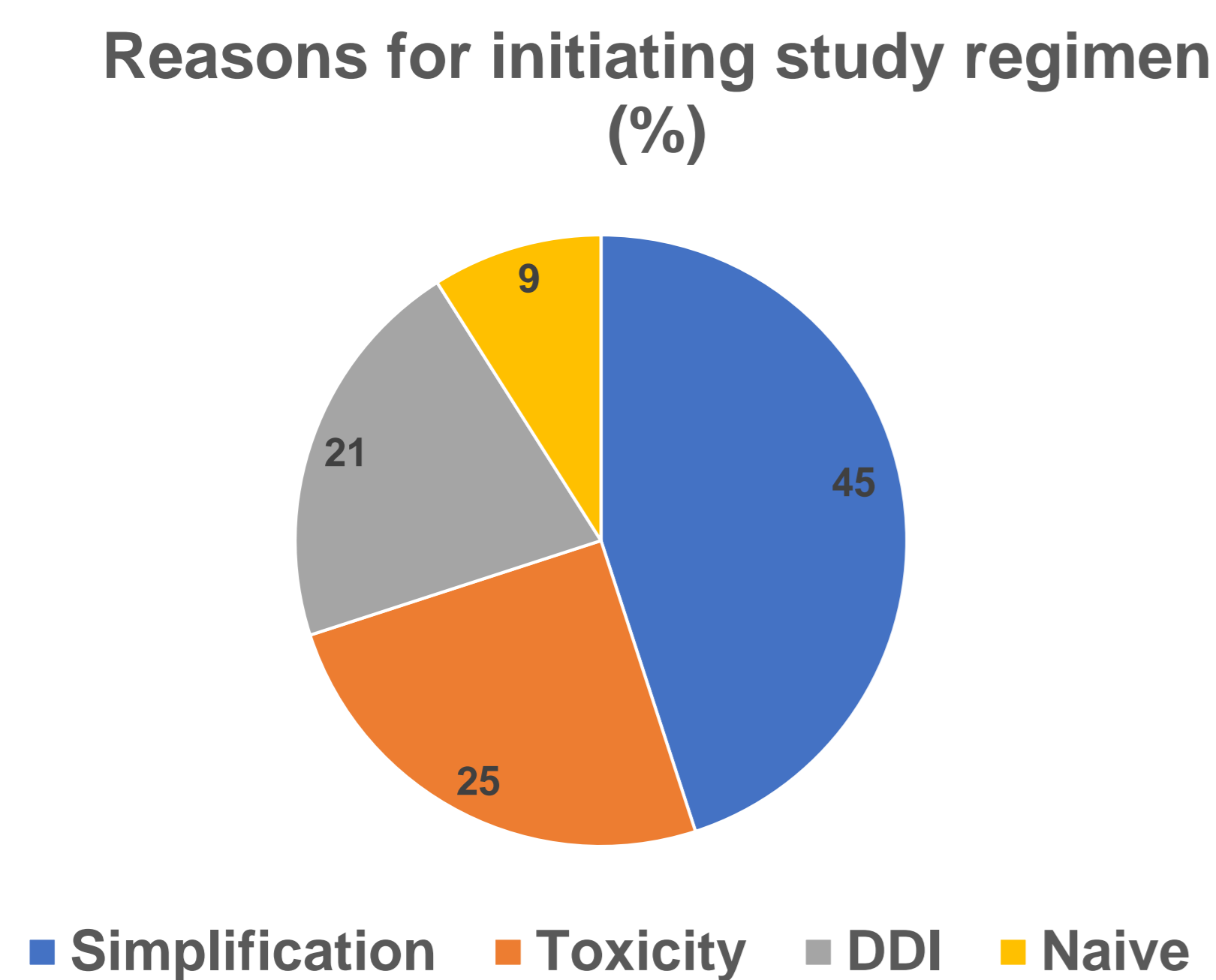
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**Background:** Occult HBV infection (isolated anti-HBcore) is present up to 30% of HIV infected patients, higher even in IDU. The aim of our study is to evaluate proportion of HIV infected patients with previous contact with HBV which start ABC/3TC/DTG Vs FTC/TAF/EVG/c or FTC/TDF/EVG/c for any reason in Puerta de Hierro Majadahonda University Hospital, Madrid (tertiary Public Health System Centre).

**Table 1. Baseline epidemiological characteristics**

Baseline Features	
Sex	Male (90%)
Age	52 years (IQR 49-55)
Nationality	Spanish (95%)
Route of HIV transmission:	
• IDU	58%
• MSM	21%
• Heterosexual	17%
AIDS	31%
HCV antibodies (ab) +	75%
HCV RNA +	45% (from HCV ab+)
Median time of follow-up	58 months (IQR 49-67)

**Figure 1. Causes for starting study ART regimen.**



**Table 2. Baseline virology characteristics**

Baseline virology data	
Median time from first ART	16 years (IQR 9-19)
Baseline viral load mean	1.67 log (SD 1.07)
HIV plasma load <1.3 log	86%
Median baseline TCD4 cell count and percentage	516 (IQR 361-713) 30% (IQR 22-34)
Median baseline CD4/CD8	0.58 (IQR 0.35-0.86)

5 patients (9.4%) were under other immunosuppressants drugs before initiating study period, without differences between two groups. Only 9.4% modified ART study regimen along 5 years.

**Materials and methods:** Observational and retrospective study where patients with occult HBV infection (negative HBsAg, positive anti-HBc, negative anti-HBs) were included. We compare HBV reactivation between 2014 and 2018 in 2 groups:

- Persons which initiate ABC/3TC/DTG Vs
- Those that started FTC/TAF/EVG/c or FTC/TDF/EVG/c (naive, simplification, toxicity, drug-drug interactions, virological rescue).

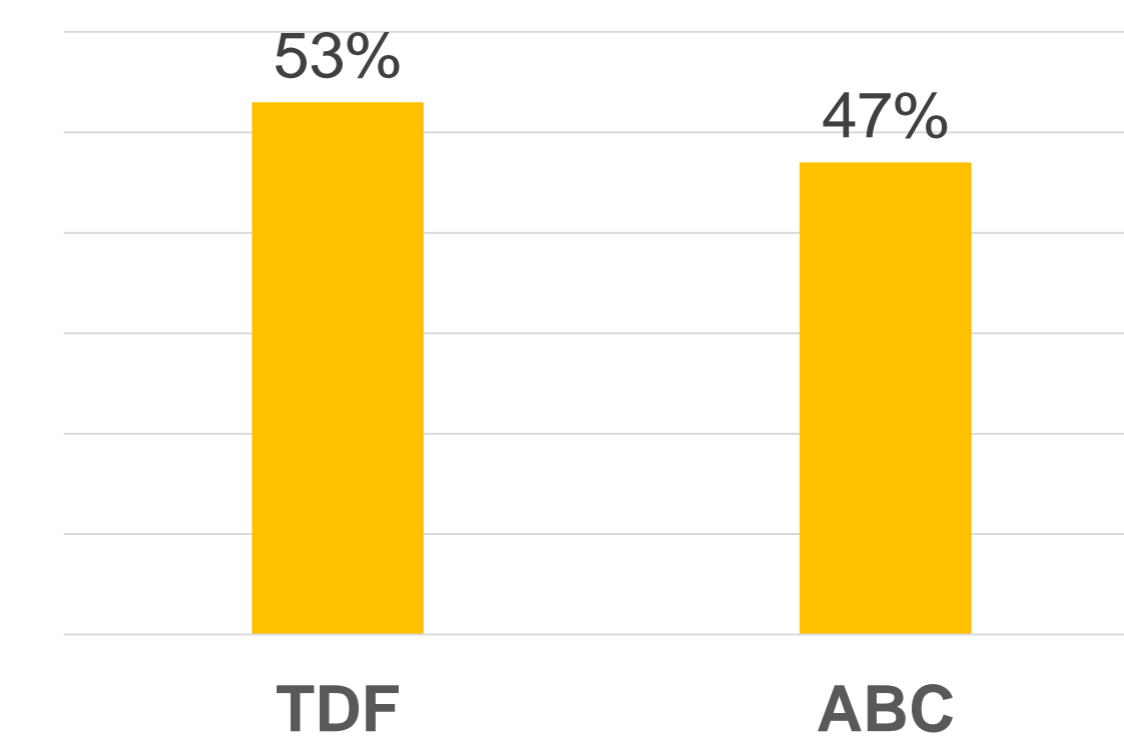
We excluded those with:

- Positive HBsAg,
- Positive HBV DNA, or
- Are under treatment with other anti HBV drugs (entecavir, adefovir, interferon).

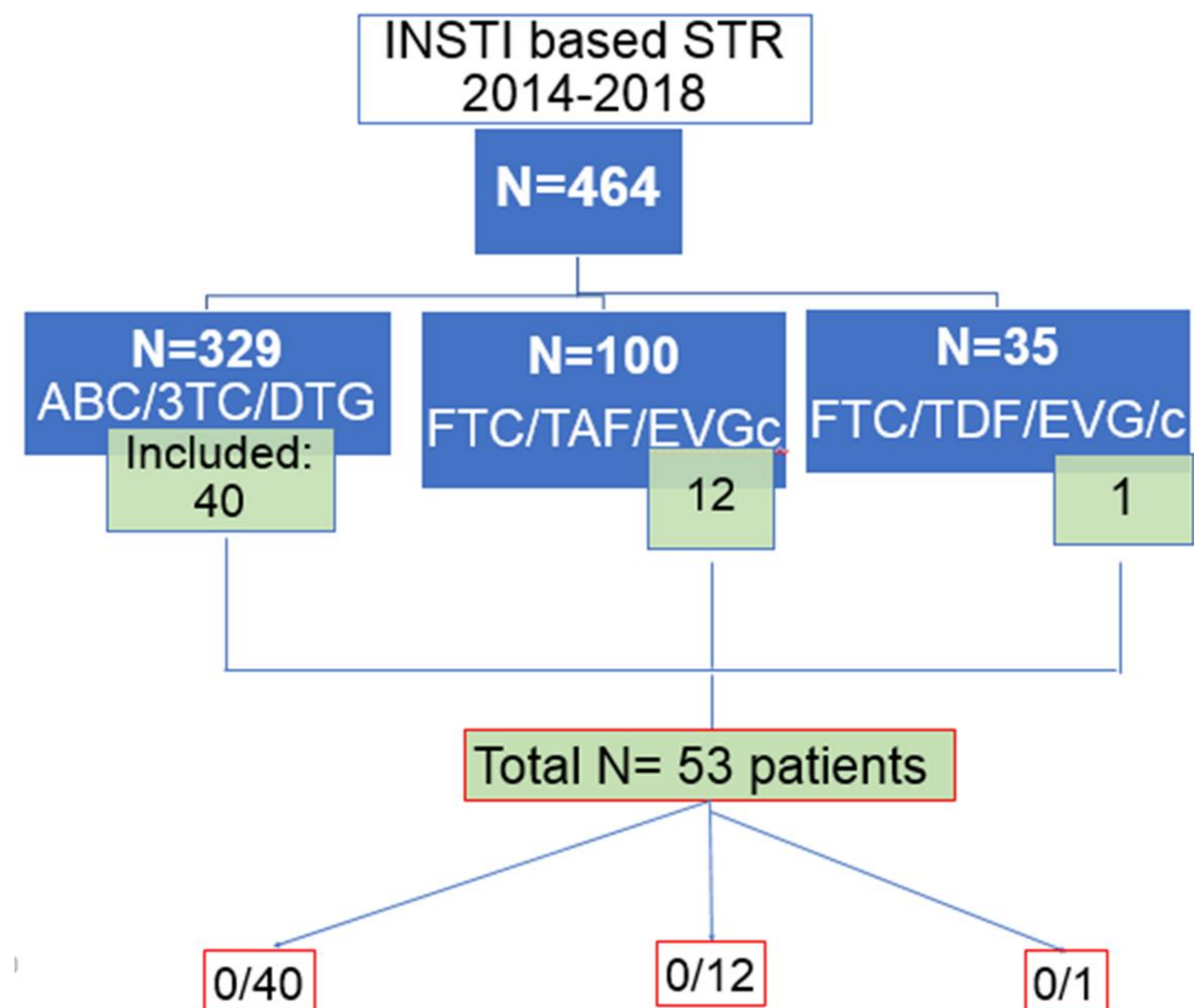
Clinical and epidemiological baseline characteristics, hepatitis serology, HIV plasma load, TCD4 cell count, and HBV DNA (baseline and after study treatment was started) were collected from electronical database.

**Main outcome** was HBsAg conversion or positive HBV plasma DNA.

**Figure 2. Previous NRTI**



**Figure 3. Cases of patients with isolated positive anti HBcore per treatment group between 2014 and 2018 and number or reactivations.**



**Conclusions:** we did not observe reactivation of HBV infection in HIV-infected patients treated with ABC/3TC/DTG, FTC/TAF/EVG/c or FTC/TDF/EVG/c for any reason along last 5 years.