

# The impact of integrase strand transfer inhibitors (InSTIs) on weight gain among adults with HIV in clinical care

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# BACKGROUND

Uncontrolled HIV patients starting or switching regimens may experience weight gain as seen in other studies.<sup>1</sup> Previous data has shown that integrase strand transfer inhibitors (InSTIs) for HIV may be associated with clinically significant weight gain, in addition to the "return to health phenomenon".

# **OBJECTIVE**

- Do patients being treated with InSTI-based regimens experience a statistically significant weight gain compared to those who are newly infected with HIV vs. those who are chronically infected?
- Is there an association between InSTI-based regimens and metabolic syndrome?

# METHODS

Single center, retrospective cohort study of patients seeking HIV care at Northwestern Memorial Hospital from Jan 2001 to Nov 2018.

Inclusion Criteria	Exclusion Criteria
<ul> <li>Adults &gt; 18 y/o with HIV</li> <li>Baseline weights</li> <li>Additional weight at least 6 mo later</li> </ul>	<ul> <li>Patients who developed malignancy, thyroid disorders, and disseminated TB or MAC</li> </ul>

### RESULTS

Well-controlled → proxy for chronic HIV
 Entered cohort with VL < 2000</li>
 Uncontrolled → proxy for new or untreated HIV

• Entered cohort with VL > 2000

910 participants

612 met inclusion criteria

550 remained on same ART throughout study

	Mean Weight Change (kg, 95% CI)			
Group	6 mo	1 year	2 years	
WN	0.22 [-0.86, 1.3]	-0.86 [-2.94, 1.22]	0.026 [-2.347, 2.399]	
WI	0.21	-0.50	0.43	
	[-0.79, 1.21]	[-2.02, 1.04]	[-1.35, 2.21]	
UN	1.74	3.84	2.42	
	[0.24, 3.24]	[1.57, 6.11]	[-0.44, 5.28]	
UI	0.78	2.33	3.04	
	[-0.15, 1.71]	[1.02, 3.64]	[1.2, 4.85]	

Group	HTN Incidence	DM Incidence	HLD Incidence
WN vs. WI	26% vs. 34%	32% vs. 37%	29% vs. 32%
UN vs. UI	34% vs. 26%	35% vs. 22% (p=0.03)*	30% vs. 21%

<sup>\*</sup>Fisher's exact 2-tailed test

86 Well-controlled, InSTI-naïve (WN)

153 Well-controlled, InSTI (WI) 166 Uncontrolled, InSTI-naïve (UN)

(UI)

145 Uncontrolled, InSTI
• Exception there
• This dates

## CONCLUSIONS

- When comparing controlled vs. uncontrolled HIV patients who are either on InSTI regimens or not, significant weight gain was seen only in uncontrolled patients on InSTI regimens at two years.
- Uncontrolled patients on other regimens had weight gain at one year but was not significant at two.
- Well controlled individuals did not have statistically significant weight change on either type of regimens.
- Except for a higher diabetes incidence in the uncontrolled naïve group, there was no difference in metabolic disease incidences at 2 years
- This data is confounded by the fact that we did not control for those who were on TAF vs. TDF, which may also affect weight gain.

#### References

<sup>1</sup>Sax et al. Weight Gain Following Initiation of Antiretroviral Therapy: Risk Factors in Randomized Comparative Clinical Trials, *Clinical Infectious Diseases*, Volume 71, Issue 6, 15 September 2020, Pages 1379–1389

