

# THE debate: a case for 3DR

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# Disclosures

- Speaker/advisory fees
  - ViiV, MSD, Janssen, Gilead, Theratech, Cipla & Mylan
- Investigator on Gilead, ViiV, & Janssen sponsored trials

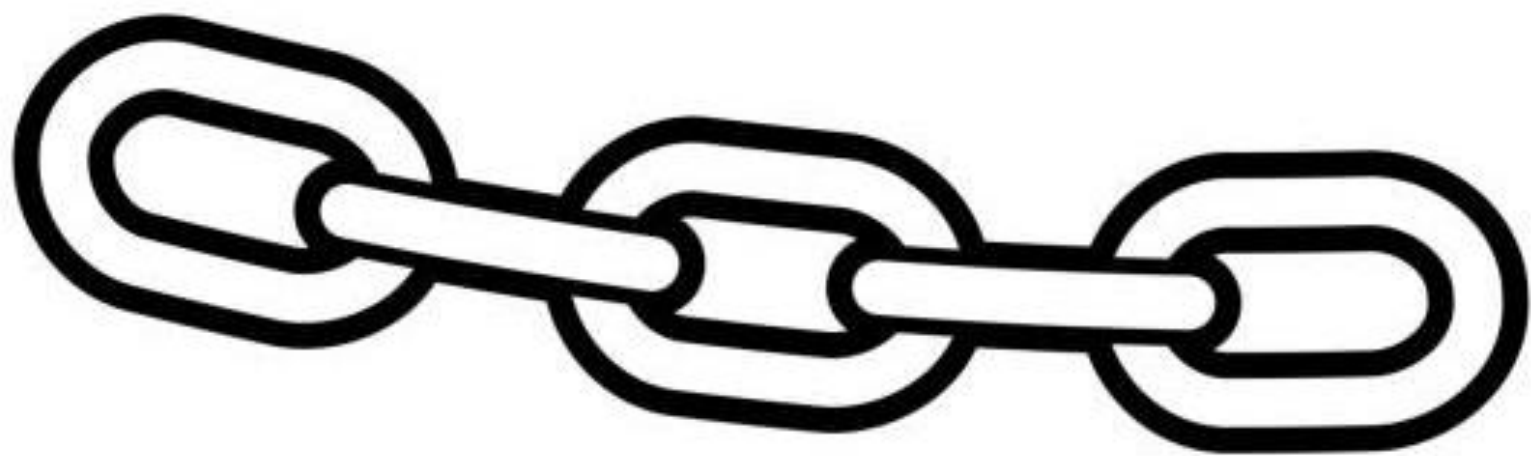
My name is Laura

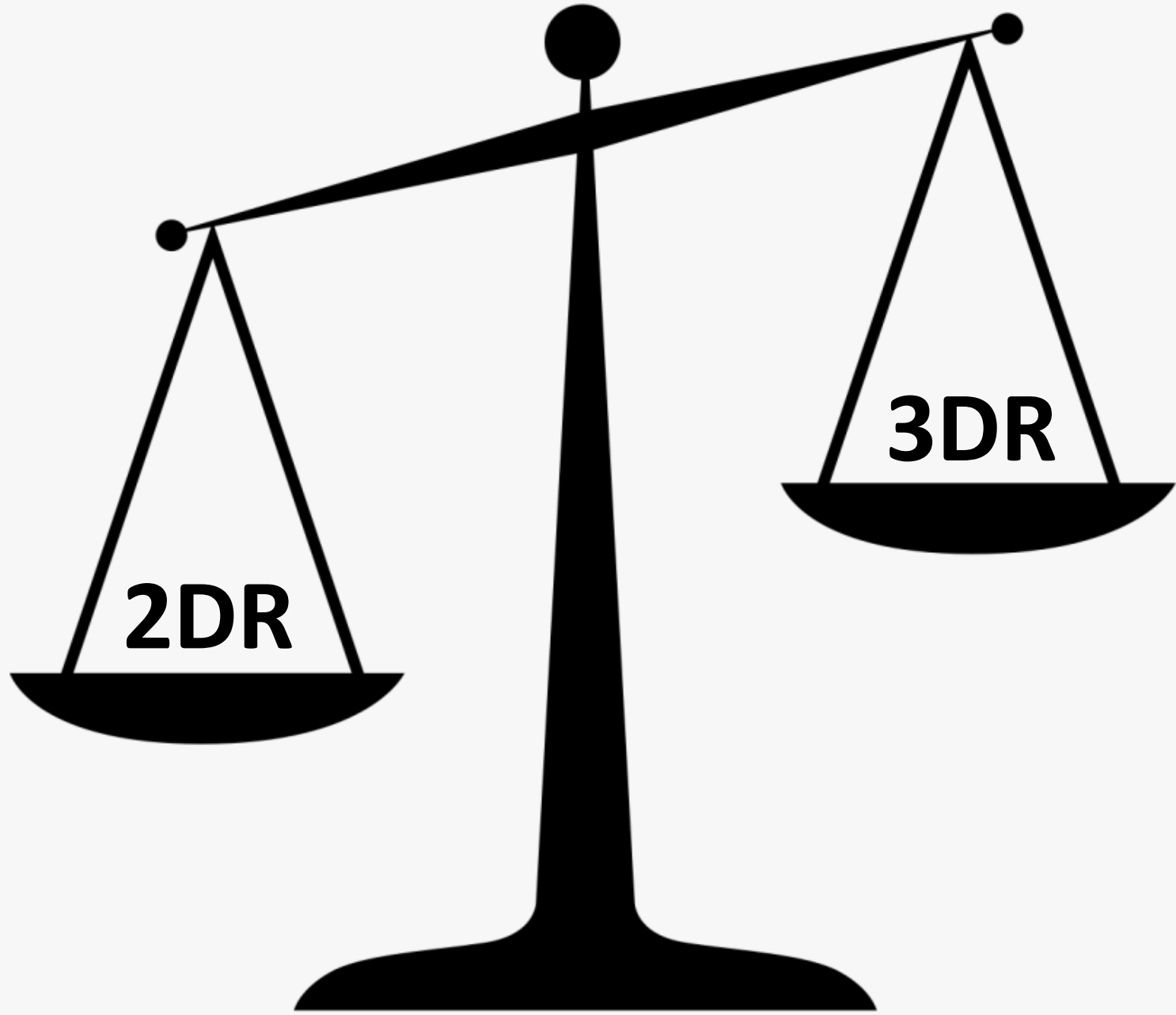
I am a reformed 2DR sceptic

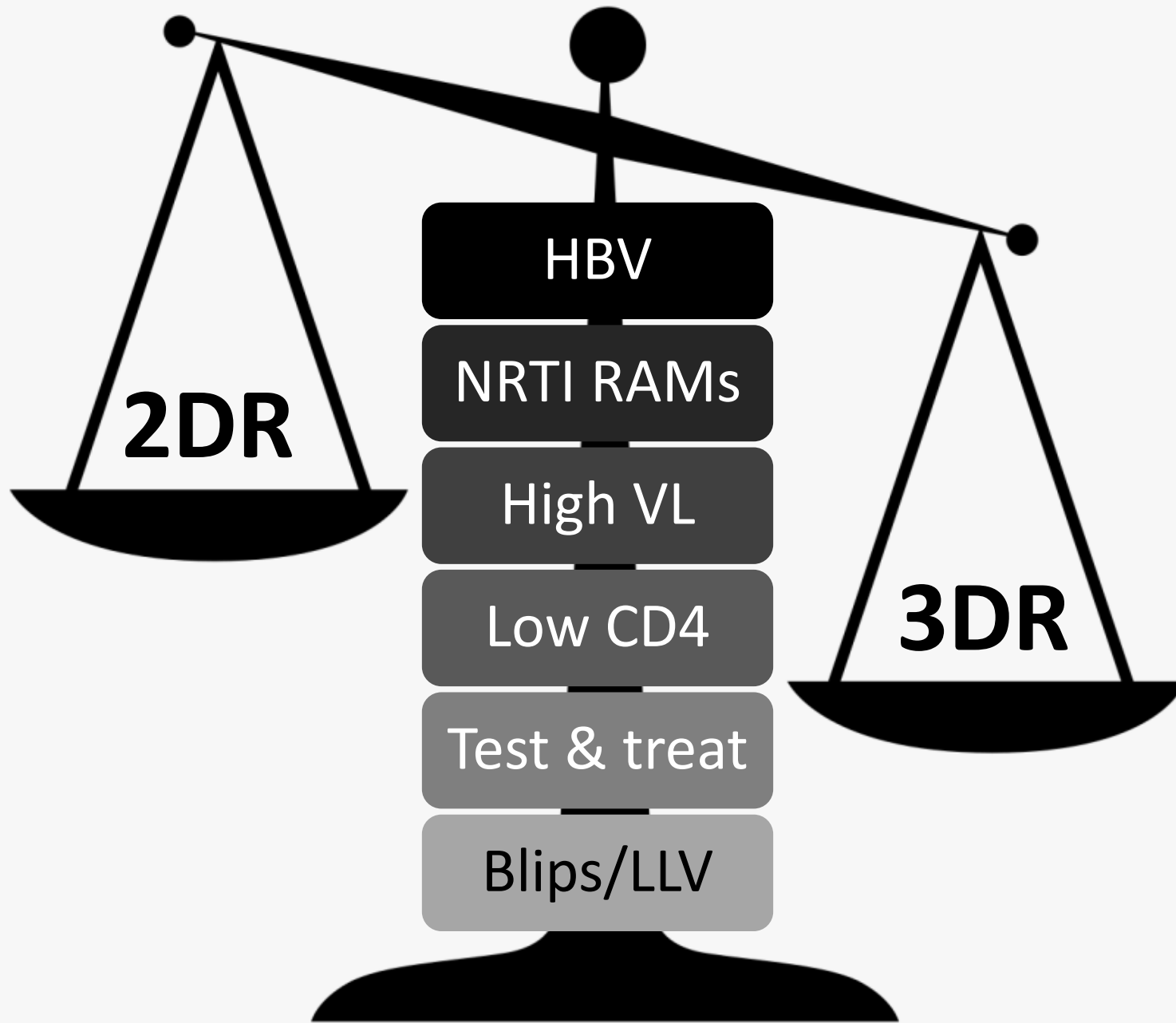






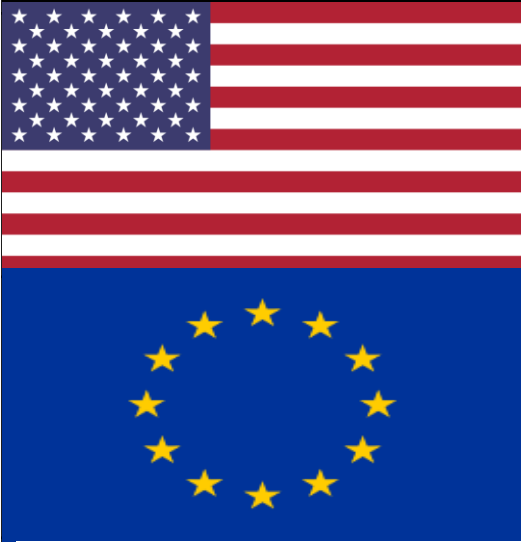





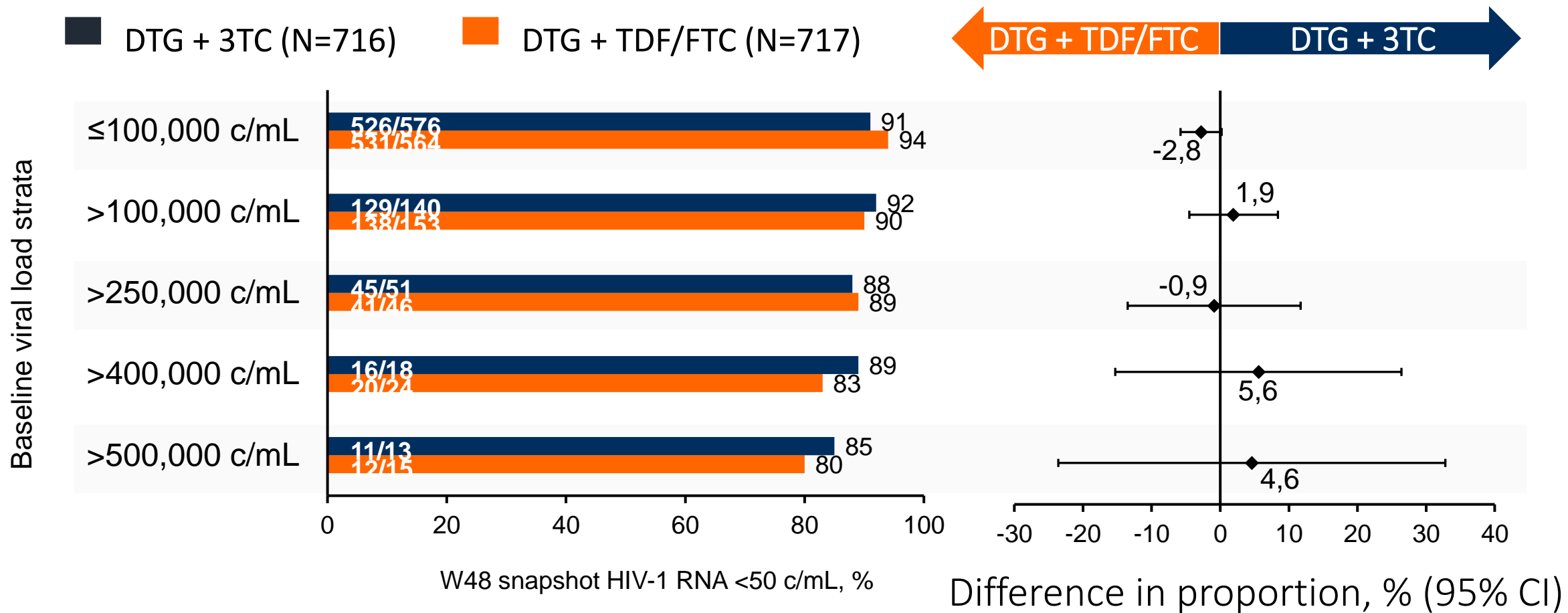




# 2DR in the guidelines

	1 <sup>st</sup> line	Suppressed switch
 		

# But.....BUT.....



BUT.....!!!!



**NO**



**NO**



**NO**

BUT.....!!!!



**NEIN**



**NEIN**

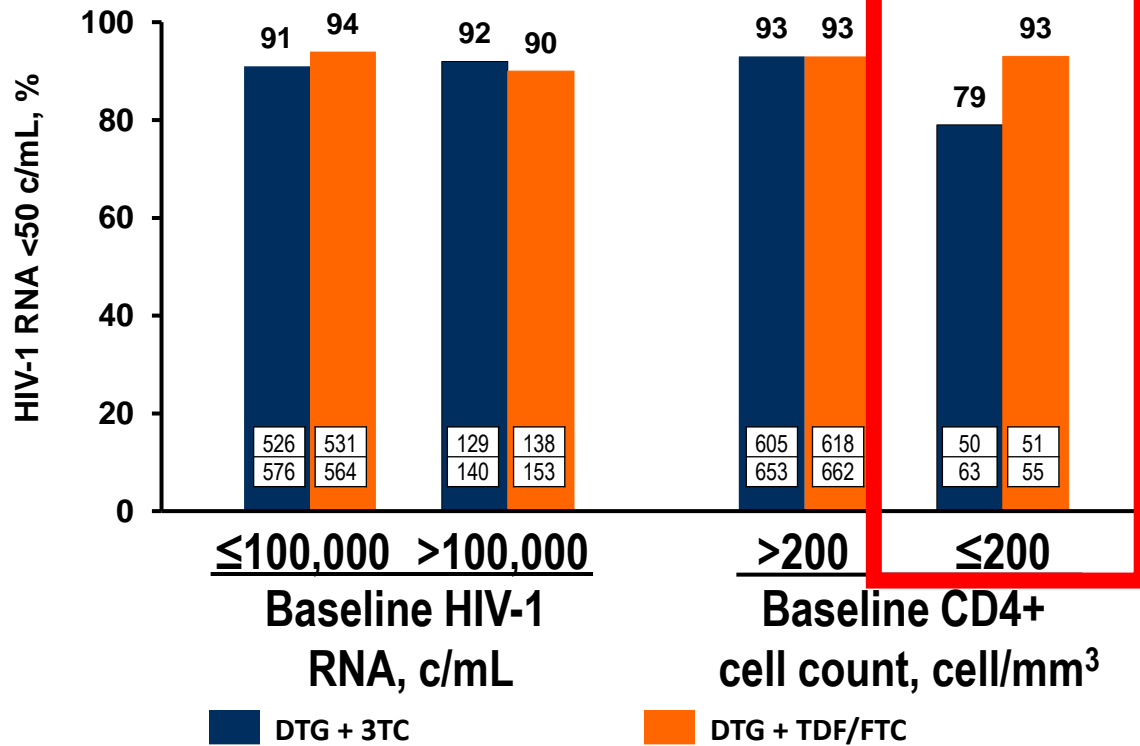


**NEIN**

# GEMINI: W48

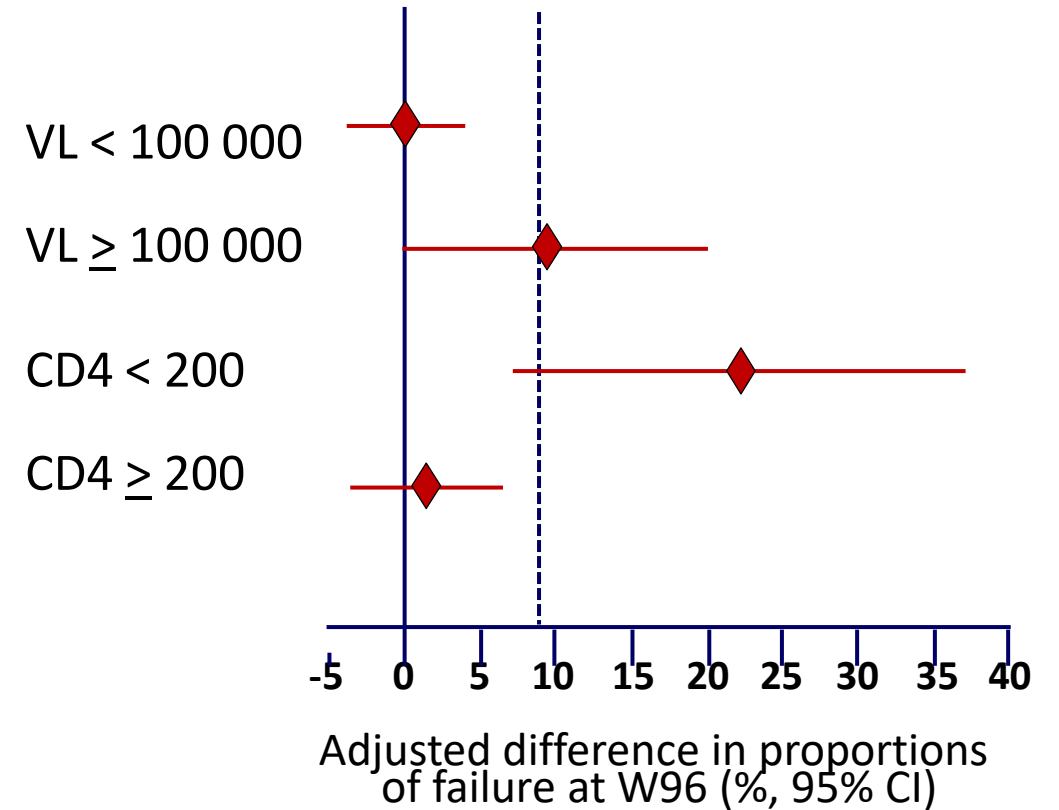
# NEAT-001: W96

## Snapshot Analysis



TDF/FTC  
+ DRV/r

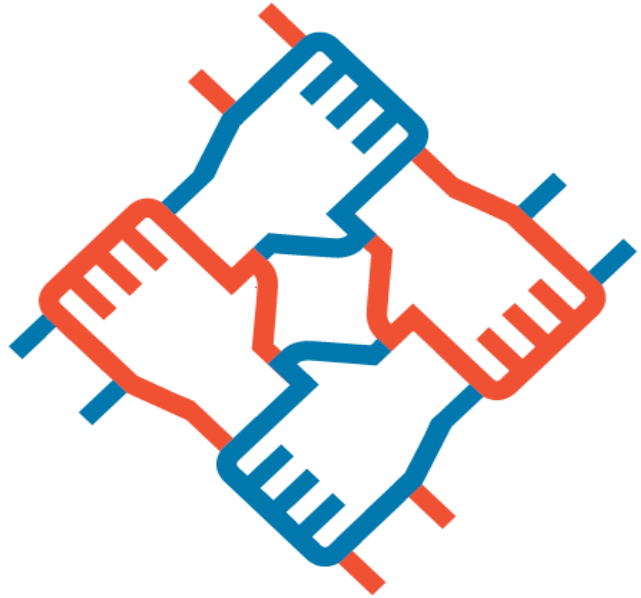
RAL +  
DRV/r





## GUIDELINES

“it is the view of the writing group that persistent low-level viraemia or recurrent blips on a low-genetic barrier regimen... warrants prompt regimen change to a **high-genetic barrier three-drug regimen**”



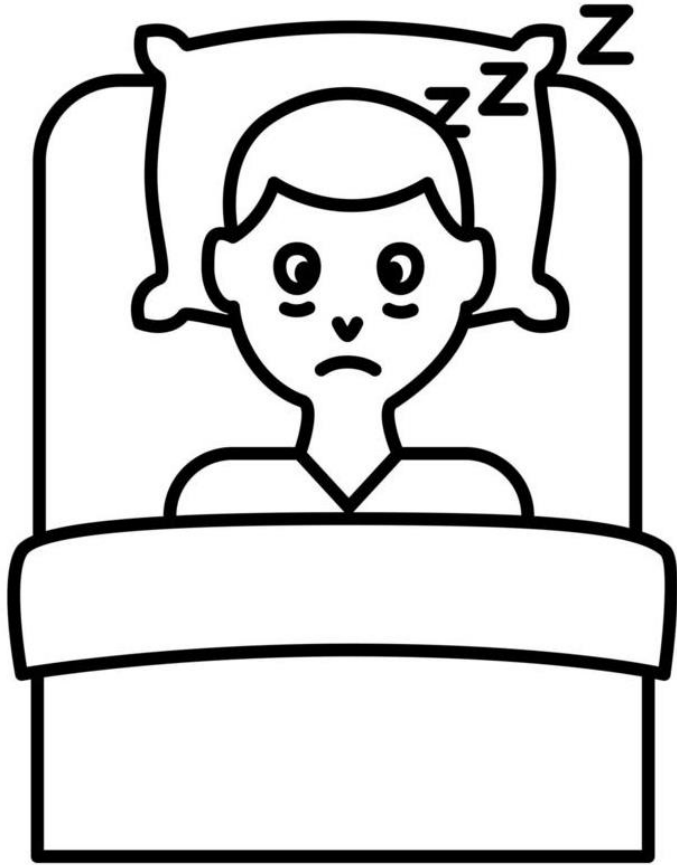
**NADIA**

Baseline intermediate to high level resistance

**TDF: 59%    ZDV: 18%    3TC: 92%**

**92%**

on TDF/3TC + DTG or DRV/r  
had a VL >400 at W96





Treatment  
history

Resistance

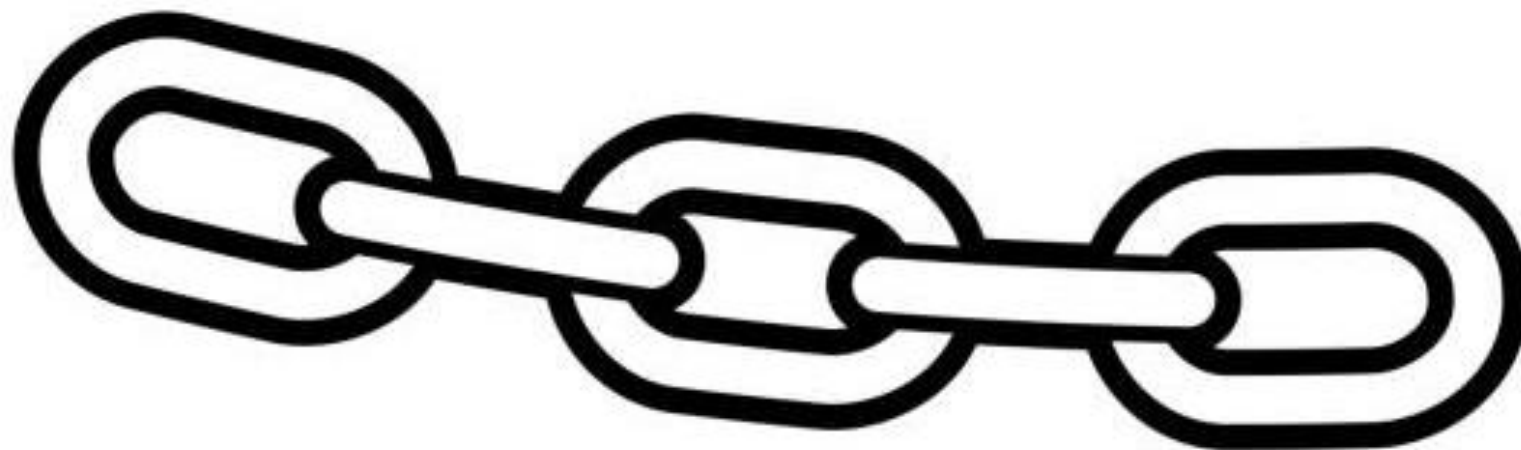
HBV







There is strength in numbers



And that number is 3

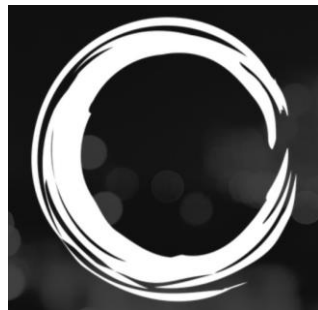
Thank you for listening: questions?



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