

Recommendation

The HTAC recommends the **inclusion of Tenofovir/Lamivudine/Dolutegravir (TLD) in the Philippine National Formulary (PNF)** for the **first-line treatment** of HIV among treatment-naive adolescents and adults living with HIV, due to the following reasons:

- The use of TLD compared to EFV-based regimens shows **statistical significance in terms of efficacy for achieving viral suppression** at 48 and 96 weeks based on high quality of evidence.
- The use of TLD compared to standard dose EFV-based regimens shows **lower odds for treatment-related adverse events**, based on moderate quality of evidence. No statistical differences were found for odds for mortality and treatment-related serious adverse events, based on very low to low quality of evidence.
- In terms of cost, our projection shows that there is no additional cost for the government in using TLD versus TLEfv for treatment-naive PLHIV.

In addition, the HTAC recommends Tenofovir/Lamivudine/Dolutegravir (TLD) for the **second-line treatment** of HIV among treatment-experienced adults living with HIV, due to the following reasons:

- The use of TLD compared to LPV/r-based regimens shows **statistical significance in terms of efficacy for achieving viral suppression at 24 and 48 weeks** based on moderate to high quality of evidence.
- The use of TLD compared to LPV/r-based regimens shows **lower odds for treatment-related adverse events**, based on low quality of evidence. No statistical differences were found for odds for mortality and treatment-related serious adverse events, based on very low quality of evidence.
- In addition, shifting to once-daily dosing of the fixed-dose combination TLD may improve patient adherence compared with the current regimen *LPV/r + AZT/3TC* consisting of separate drugs required to be taken multiple times a day (*i.e., LPV/r - 2 tablets twice a day and AZT/3TC - 1 tablet twice a day*).
- In terms of cost, the 5-year comparative drug costing calculation shows annual cost-savings for the government in using TLD versus LPV/r-based regimen ranging from PHP 152M to PHP 596M.

Lastly, including TLD in the PNF shall enable nationwide access to fully subsidized, safe, and effective therapies for treatment-naive and treatment-experienced PLHIV in the Philippines.

To optimize access to this therapy, the DPCB, through the NASPCP, must ensure consistent supply and equitable distribution through all its treatment hubs across the country.

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