**RESULTS**

**Clinical Characteristics**

- **Virologic Failure**
  - Defined as either (A) 2 consecutive VL ≥200 copies/mL after suppression (VL ≤50) before 36 weeks, or (B) 1 VL ≥200 with core agent discontinuation after 36 weeks, or (C) 2 consecutive VL ≥200 after suppression (VL ≤50) before 36 weeks of ART.

**Virologic Failure Probability (%)**

<table>
<thead>
<tr>
<th>Core Agent</th>
<th>Cumulative Failure Probability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dolutegravir</td>
<td>7.7% (n=152)</td>
</tr>
<tr>
<td>ELVITEGRAVIR</td>
<td>12.6% (n=213)</td>
</tr>
<tr>
<td>RALTEGRAVIR</td>
<td>21.3% (n=82)</td>
</tr>
<tr>
<td>Darunavir</td>
<td>32.0% (n=43)</td>
</tr>
</tbody>
</table>

**DISCUSSION**

The frequency and cumulative probability of virologic failure were highest among RAL users, followed by DRV users. The frequency and cumulative probability were higher among EVG users than DTG users. These associations remained after adjusting for important clinical characteristics.

**KEY FINDINGS**

- Overall, EVG users had more favorable baseline clinical characteristics than DTG users, while RAL and DRV users had less favorable characteristics.
- After adjustment for baseline covariates, RAL and DRV users experienced virologic failure statistically significantly faster than DTG users (EVG vs. DTG: HR = 1.20 (95% CI: 0.97, 1.49)).
- These associations remained after adjusting for important clinical characteristics.

**ACKNOWLEDGMENTS**

This work was supported by ViiV Healthcare, Inc., Research Triangle Park, NC, and Carolinas Healthcare System, Charlotte, NC.

**SPONSORSHIP**

The content is solely the responsibility of the OPERA CoMpi partners and does not necessarily represent the official views of the NS/US or DHHS.

**REFERENCES**


3. Virologic Failure Probability (%) Throughout follow-up. Kaplan-Meier survival probabilities of virologic failure estimated with a Cox proportional hazards model (Figure 3).

4. Figure 4. Association Between Core Agent and Time to Virologic Failure Estimated with a Multivariate* Cox Proportional Hazards Model.