B-FREE
BOOSTER-FREE THERAPY FOR RESISTANT HIV

Newsletter #2
May 2024

Dear Colleagues,

It has been almost six months since the first patient was recruited in the B-Free trial. Meanwhile, 21 patients were screened and 17 randomized.

All sites have now received the greenlight to start recruiting patients for B-Free, so we hope that the number of included participants will increase within the next few weeks. However, recruitment has generally been slower than expected, mainly reflecting lower numbers of eligible persons than initially estimated. We are currently working on adding new recruitment sites in Switzerland, the Netherlands and France.

This newsletter contains a section for study nurses. Please have a look at it and do not hesitate to contact us if anything is unclear.

Thank you all for your continued commitment in making this trial possible!

The B-Free team

Recruitment

All sites in Switzerland have received their "greenlight" to start recruiting patients for B-Free. The current state of recruitment as per May 2nd, 2024 is shown in Table 1:

	Number of patients
Screened	21
Eligible	20
Randomized	17
Week 4 visit	15
Week 12 visit	7

The characteristics of the 17 randomized patients are described in Table 2:

Characteristic	**N = 17**
Age	
Mean (SD)	60.5 (11.5)
Median (Range)	63.0 (30.0, 76.0)
Gender, n (%)	
Male	12 (71%)
Female	5 (29%)
Ethnicity, n (%)	
White	15 (88%)
Black	2 (12%)
Hispano-American	0 (0%)
Asian	0 (0%)
Other	0 (0%)

New centers

Discussions with new recruitment sites are ongoing.

In Switzerland, these include Hospital Aarau, as well as private practitioners in Lausanne and in Zurich.

In the Netherlands, these include centers of the ATHENA Cohort in Amsterdam and Utrecht, whereas in France, we contacted the Aquitaine Cohort.

Qualitative sub-study

Built within the B-Free trial, a qualitative sub-study is exploring the perceptions of people living with HIV about the trial, HIV therapy, and HIV research in general.

Researchers are currently running individual interviews with trial participants (intervention and control arms), people who were excluded from the trial based on pre-defined exclusion criteria, and soon among people who could participate in B-Free but declined.

Interviews are conducted in German in Bern and Zurich, and in French in Lausanne, in collaboration with researchers from the Institute for Social and Preventive Medicine at the University of Bern, and from Unisanté in Lausanne.

So far, 7 interviews took place at CHUV, Lausanne, 2 at USZ, Zurich, and 4 at Insel, Bern. The majority of B-Free participants agreed to participate in the sub-study and to be interviewed.

In total, we aim to interview approximately 60 people living with HIV.

Ethics

The amended study protocol submitted to Swissethics end of March 2024 was approved on April 24, 2024.

The main changes are:

- Inclusion of patients who declined participation in B-Free in the qualitative sub-study;
- Simplification of the main patient information and consent form about potential side effects of the already-approved Dolutegravir drug.

→ Patients who declined participation can start being offered to participate to the qualitative sub-study in Lausanne and Bern

→ The new PIC will replace the former one at all sites in all languages (separate email)

Publications

We are currently working on two manuscripts about B-Free:

Protocol paper (Target Journal: BMJ Open)

Feasibility survey data which were collected in Bern, Zurich, and Geneva prior to the grant application (Target Journal: JIAS)

Events

B-Free was presented as poster at the Day of Clinical Research of the Department of Clinical Research (University of Bern) on December 7, 2023.

Scientific Committee

The next B-Free Scientific Committee will take place on June 17, 2024.

Study nurses to study nurses

Laboratory

Bilirubin

In the SHCS, total bilirubin is typically measured only for patients with Hepatitis B or C. However, in the context of B-Free study, please ensure that bilirubin levels are measured for all participants at baseline, week 12, and week 48, regardless of their hepatitis status. Additionally, bilirubin should be measured immediately if a liver toxicity event occurs.

Lipid levels

We would like to remind you that that lipid levels (triglycerides, total cholesterol, LDL cholesterol, HDL cholesterol) are part of the secondary outcome and should be measured at baseline, week 24, and week 48.

eCRFs

Screening Visit → Virological History

Please make sure to upload all HIV resistance tests that are available for the study participant (not only the most recent one). For compliance with GCP, please ensure that all identifying patient information on documents are removed prior to uploading them into REDCap. This also applies to the file name and the patient address.

Study nurses to study nurses

Baseline Visit → Medical History

We would like to remind you that we need data on all currently ongoing diagnoses, and all historical neurological and psychiatric diagnoses.

If the exact date of a diagnosis is unknown, click 'exact date unknown' and provide an approximate date of onset. At a minimum, a start year should be estimated. Please provide a comment in the comments section of the eCRF and the source data that the date of onset is approximate.

Visit Week 4 - 48 → HIV-Medication → Pill count

If the patient did not bring the study drug bottle, please leave “Pill count” blank and complete it at the next visit (please mention this in the comment section). We added a new “self-reported adherence” question for instances when the pill count is either missing or cannot be assessed. In these instances, please always provide a self-reported adherence, even if you plan to enter the pill count at the next visit.

Pill-count variations due to wrong drug combinations (e.g. intake of 2 pills of Dovato instead 1 pill Dovato + 1 pill Pifeltro) do not impede the overall adherence, as long as one ART component was taken. Every day counts as “successful” if at least one of the components is taken by the participant.

In such situations, you will need to enter 3 pill count episodes:

1. First episode up to the day before the incorrect intake, during this time the number of daily units taken is 1 and the participant has no dose variation;
2. Second episode of incorrect intake: The number of daily units taken is also 1, but the patient has a dose variation. Please select "other", and write a comment. If the exact day is not known, please use the day in the middle of the pill count period;
3. Third episode after the day of the incorrect intake until the end of the period: number of daily units taken is 1 without dose variation.

Please do not hesitate to contact us for more clarifications!

For any question or comment, please email us at **b-free@insel.ch**
Have a look at our website: **www.bfree-trial.ch**