# Clinical trial results:
# A Phase IIa Multicenter, Open-Label Clinical Trial to Evaluate the Safety and Efficacy of MK-1439A in Treatment-Naïve HIV-1 Infected Subjects With Selected Non-Nucleoside Reverse Transcriptase Inhibitor (NNRTI) Transmitted Resistance Mutations

## Summary

| | |
|---|---|
| EudraCT number | 2015-003616-20 |
| Trial protocol | GB FR |
| Global end of trial date | 28 October 2020 |

### Results information

| | |
|---|---|
| Result version number | v1 (current) |
| This version publication date | 01 October 2021 |
| First version publication date | 01 October 2021 |

## Trial information

### Trial identification

| | |
|---|---|
| Sponsor protocol code | 1439A-030 |

### Additional study identifiers

| | |
|---|---|
| ISRCTN number | - |
| ClinicalTrials.gov id (NCT number) | NCT02629822 |
| WHO universal trial number (UTN) | - |

Notes:

### Sponsors

| | |
|---|---|
| Sponsor organisation name | Merck Sharp & Dohme Corp. |
| Sponsor organisation address | 2000 Galloping Hill Road, Kenilworth, NJ, United States, 07033 |
| Public contact | Clinical Trials Disclosure, Merck Sharp & Dohme Corp., ClinicalTrialsDisclosure@merck.com |
| Scientific contact | Clinical Trials Disclosure, Merck Sharp & Dohme Corp., ClinicalTrialsDisclosure@merck.com |

Notes:

### Paediatric regulatory details

| | |
|---|---|
| Is trial part of an agreed paediatric investigation plan (PIP) | No |
| Does article 45 of REGULATION (EC) No 1901/2006 apply to this trial? | No |
| Does article 46 of REGULATION (EC) No 1901/2006 apply to this trial? | No |

Notes:

## Results analysis stage

| | |
|---|---|
| Analysis stage | Final |
| Date of interim/final analysis | 28 October 2020 |
| Is this the analysis of the primary completion data? | Yes |
| Primary completion date | 28 November 2018 |
| Global end of trial reached? | Yes |
| Global end of trial date | 28 October 2020 |
| Was the trial ended prematurely? | No |

Notes:

## General information about the trial

Main objective of the trial:

The primary objectives of this study are to evaluate the antiretroviral activity and the safety/tolerability of open-label doravirine/lamivudine/tenofovir disoproxil fumarate (DOR/3TC/TDF; MK-1439A; DELSTRIGO™) consisting of a single fixed-dose combination (FDC) tablet of DOR/3TC/TDF 100 mg/300 mg/300 mg in treatment-naive HIV-1 infected participants with select non-nucleoside reverse transcriptase inhibitor (NNRTI) transmitted resistance-associated mutations. This study had a Base Study (Day 1 to Week 96) and an optional Study Extension (Week 96 to Week 192).

Protection of trial subjects:

This study was conducted in conformance with Good Clinical Practice standards and applicable country and/or local statutes and regulations regarding ethical committee review, informed consent, and the protection of human subjects participating in biomedical research.

Background therapy: -

Evidence for comparator: -

| | |
|---|---|
| Actual start date of recruitment | 14 January 2016 |
| Long term follow-up planned | Yes |
| Long term follow-up rationale | Safety, Efficacy |
| Long term follow-up duration | 24 Months |
| Independent data monitoring committee (IDMC) involvement? | No |

Notes:

## Population of trial subjects

### Subjects enrolled per country

| | |
|---|---|
| Country: Number of subjects enrolled | Canada: 2 |
| Country: Number of subjects enrolled | France: 1 |
| Country: Number of subjects enrolled | Spain: 2 |
| Country: Number of subjects enrolled | United Kingdom: 2 |
| Country: Number of subjects enrolled | United States: 3 |
| Worldwide total number of subjects | 10 |
| EEA total number of subjects | 3 |

Notes:

### Subjects enrolled per age group

| | |
|---|---|
| In utero | 0 |
| Preterm newborn - gestational age < 37 wk | 0 |
| Newborns (0-27 days) | 0 |

| | |
|---|---|
| Infants and toddlers (28 days-23 months) | 0 |
| Children (2-11 years) | 0 |
| Adolescents (12-17 years) | 0 |
| Adults (18-64 years) | 10 |
| From 65 to 84 years | 0 |
| 85 years and over | 0 |

## Subject disposition

### Recruitment

Recruitment details: -

### Pre-assignment

Screening details:

Participants were enrolled at study sites in Canada, France, Spain, UK, and USA.

### Period 1

| | |
|---|---|
| Period 1 title | Base Study |
| Is this the baseline period? | Yes |
| Allocation method | Not applicable |
| Blinding used | Not blinded |

### Arms

| | |
|---|---|
| **Arm title** | DOR/3TC/TDF |

Arm description:

Treatment-naïve HIV-1 infected participants with NNRTI transmitted resistance-associated mutations were treated with open-label MK-1439A (DOR/3TC/TDF 100mg/300mg/300mg) as a FDC tablet taken once daily by mouth for 96 weeks in the Base Study. In addition, eligible participants continued to receive the same MK-1439A regimen from Week 96 to Week 192 during the optional Extension Study.

| | |
|---|---|
| Arm type | Experimental |
| Investigational medicinal product name | Doravirine/lamivudine/tenofovir disoproxil fumarate |
| Investigational medicinal product code | |
| Other name | MK-1439A<br>DELSTRIGO™ |
| Pharmaceutical forms | Tablet |
| Routes of administration | Oral use |

Dosage and administration details:

MK-1439A FDC tablet of MK-1439 (doravirine) 100 mg / lamivudine 300 mg / tenofovir disoproxil fumarate 300 mg taken by mouth.

| **Number of subjects in period 1** | DOR/3TC/TDF |
|---|---|
| Started | 10 |
| Completed | 7 |
| Not completed | 3 |
| Non-Compliance With Study Drug | 1 |
| Lost to follow-up | 2 |

### Period 2

| | |
|---|---|
| Period 2 title | Extension Study |
| Is this the baseline period? | No |
| Allocation method | Not applicable |
| Blinding used | Not blinded |

## Arms

| **Arm title** | DOR/3TC/TDF |
|---|---|

Arm description:

Treatment-naïve HIV-1 infected participants with NNRTI transmitted resistance-associated mutations were treated with open-label MK-1439A (DOR/3TC/TDF 100mg/300mg/300mg) as a FDC tablet taken once daily by mouth for 96 weeks in the Base Study. In addition, eligible participants continued to receive the same MK-1439A regimen from Week 96 to Week 192 during the Extension Study.

| | |
|---|---|
| Arm type | Experimental |
| Investigational medicinal product name | Doravirine/lamivudine/tenofovir disoproxil fumarate |
| Investigational medicinal product code | |
| Other name | MK-1439A<br>DELSTRIGO™ |
| Pharmaceutical forms | Tablet |
| Routes of administration | Oral use |

Dosage and administration details:

MK-1439A FDC tablet of MK-1439 (doravirine) 100 mg / lamivudine 300 mg / tenofovir disoproxil fumarate 300 mg taken by mouth.

| **Number of subjects in period 2[1]** | DOR/3TC/TDF |
|---|---|
| Started | 6 |
| Completed | 4 |
| Not completed | 2 |
| Adverse event, non-fatal | 1 |
| Lost to follow-up | 1 |

Notes:

[1] - The number of subjects starting the period is not consistent with the number completing the preceding period. It is expected the number of subjects starting the subsequent period will be the same as the number completing the preceding period.
Justification: Participation in the Extension Study was optional.

## Baseline characteristics

| Reporting groups | |
|---|---|
| Reporting group title | DOR/3TC/TDF |

Reporting group description:

Treatment-naïve HIV-1 infected participants with NNRTI transmitted resistance-associated mutations were treated with open-label MK-1439A (DOR/3TC/TDF 100mg/300mg/300mg) as a FDC tablet taken once daily by mouth for 96 weeks in the Base Study. In addition, eligible participants continued to receive the same MK-1439A regimen from Week 96 to Week 192 during the optional Extension Study.

| Reporting group values | DOR/3TC/TDF | Total | |
|---|---|---|---|
| Number of subjects | 10 | 10 | |
| Age categorical<br>Units: Participants | | | |
| Adults (18-64 years) | 10 | 10 | |
| Age Continuous<br>Units: Years | | | |
| arithmetic mean | 37.1 | | |
| standard deviation | ± 32.5 | - | |
| Sex: Female, Male<br>Units: Participants | | | |
| Female | 2 | 2 | |
| Male | 8 | 8 | |
| Race (NIH/OMB)<br>Units: Subjects | | | |
| American Indian or Alaska Native | 1 | 1 | |
| Asian | 0 | 0 | |
| Native Hawaiian or Other Pacific Islander | 0 | 0 | |
| Black or African American | 3 | 3 | |
| White | 5 | 5 | |
| More than one race | 0 | 0 | |
| Unknown or Not Reported | 1 | 1 | |
| Ethnicity (NIH/OMB)<br>Units: Subjects | | | |
| Hispanic or Latino | 2 | 2 | |
| Not Hispanic or Latino | 6 | 6 | |
| Unknown or Not Reported | 2 | 2 | |

## End points

### End points reporting groups

| | |
|---|---|
| Reporting group title | DOR/3TC/TDF |

Reporting group description:

Treatment-naïve HIV-1 infected participants with NNRTI transmitted resistance-associated mutations were treated with open-label MK-1439A (DOR/3TC/TDF 100mg/300mg/300mg) as a FDC tablet taken once daily by mouth for 96 weeks in the Base Study. In addition, eligible participants continued to receive the same MK-1439A regimen from Week 96 to Week 192 during the optional Extension Study.

| | |
|---|---|
| Reporting group title | DOR/3TC/TDF |

Reporting group description:

Treatment-naïve HIV-1 infected participants with NNRTI transmitted resistance-associated mutations were treated with open-label MK-1439A (DOR/3TC/TDF 100mg/300mg/300mg) as a FDC tablet taken once daily by mouth for 96 weeks in the Base Study. In addition, eligible participants continued to receive the same MK-1439A regimen from Week 96 to Week 192 during the Extension Study.

### Primary: Percentage of Participants Achieving HIV-1 Ribonucleic Acid (RNA) <50 Copies/mL of Plasma at Week 48

| | |
|---|---|
| End point title | Percentage of Participants Achieving HIV-1 Ribonucleic Acid (RNA) <50 Copies/mL of Plasma at Week 48[1] |

End point description:

The percentage of participants achieving HIV-1 ribonucleic acid (RNA) <50 copies/mL in plasma at Week 48 was calculated. The Abbott RealTime HIV-1 Assay, which has a lower limit of reliable quantification (LoQ) of 40 copies/mL, was used to measure the HIV-1 RNA level in plasma samples obtained at Week 48 visit. All participants who received ≥1 dose of MK-1439A, had baseline and Week 48 data for HIV in plasma, and whose central lab results confirmed the presence of protocol-specified NNRTI resistance-associated mutations were included.

| | |
|---|---|
| End point type | Primary |

End point timeframe:

Week 48

Notes:

[1] - No statistical analyses have been specified for this primary end point. It is expected there is at least one statistical analysis for each primary end point.
Justification: Per protocol, only descriptive statistics are presented.

| End point values | DOR/3TC/TDF | | | |
|---|---|---|---|---|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 8 | | | |
| Units: Percentage of Participants | | | | |
| number (confidence interval 95%) | 100.0 (63.1 to 100.0) | | | |

### Statistical analyses

No statistical analyses for this end point

### Primary: Percentage of Participants Experiencing ≥1 Adverse Events (AE) up to Week 48

| | |
|---|---|
| End point title | Percentage of Participants Experiencing ≥1 Adverse Events (AE) up to Week 48[2] |

End point description:

The percentage of participants experiencing ≥1 AE up to Week 48 was calculated. An AE was defined as any unfavorable and unintended sign, symptom, or disease (new or worsening) temporally associated with the use of study therapy, regardless of whether or not a causal relationship with the study therapy could be determined. All participants who received ≥1 dose of MK-1439A were included.

| End point type | Primary |
|---|---|

End point timeframe:

Up to Week 48

Notes:

[2] - No statistical analyses have been specified for this primary end point. It is expected there is at least one statistical analysis for each primary end point.
Justification: Per protocol, only descriptive statistics are presented.

| **End point values** | DOR/3TC/TDF | | | |
|---|---|---|---|---|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 10 | | | |
| Units: Percentage of Participants | | | | |
| number (not applicable) | 90.0 | | | |

## Statistical analyses

No statistical analyses for this end point

## Primary: Percentage of participants who discontinued treatment due to an AE up to Week 48

| End point title | Percentage of participants who discontinued treatment due to an AE up to Week 48[3] |
|---|---|

End point description:

The percentage of participants who discontinued from study medication due to an adverse event was calculated. An AE was defined as any unfavorable and unintended sign, symptom, or disease (new or worsening) temporally associated with the use of study therapy, regardless of whether or not a causal relationship with the study therapy could be determined. All participants who received ≥1 dose of MK-1439A were included.

| End point type | Primary |
|---|---|

End point timeframe:

Up to Week 48

Notes:

[3] - No statistical analyses have been specified for this primary end point. It is expected there is at least one statistical analysis for each primary end point.
Justification: Per protocol, only descriptive statistics are presented.

| **End point values** | DOR/3TC/TDF | | | |
|---|---|---|---|---|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 10 | | | |
| Units: Percentage of Participants | | | | |
| number (not applicable) | 0.0 | | | |

## Statistical analyses

No statistical analyses for this end point

### Primary: Percentage of Participants Experiencing ≥1 Adverse Events (AE) up to Week 96

| End point title | Percentage of Participants Experiencing ≥1 Adverse Events (AE) up to Week 96[4] |
|---|---|

End point description:

The percentage of participants experiencing ≥1 AE up to Week 96 was calculated. An AE was defined as any unfavorable and unintended sign, symptom, or disease (new or worsening) temporally associated with the use of study therapy, regardless of whether or not a causal relationship with the study therapy could be determined. All participants who received ≥1 dose of MK-1439A were included.

| End point type | Primary |
|---|---|

End point timeframe:

Up to Week 96

Notes:

[4] - No statistical analyses have been specified for this primary end point. It is expected there is at least one statistical analysis for each primary end point.
Justification: Per protocol, only descriptive statistics are presented.

| **End point values** | DOR/3TC/TDF | | | |
|---|---|---|---|---|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 10 | | | |
| Units: Percentage of Participants | | | | |
| number (not applicable) | 90.0 | | | |

### Statistical analyses

No statistical analyses for this end point

### Primary: Percentage of Participants Who Discontinued Treatment Due to an AE up to Week 96

| End point title | Percentage of Participants Who Discontinued Treatment Due to an AE up to Week 96[5] |
|---|---|

End point description:

The percentage of participants who discontinued from study medication due to an adverse event was calculated. An AE was defined as any unfavorable and unintended sign, symptom, or disease (new or worsening) temporally associated with the use of study therapy, regardless of whether or not a causal relationship with the study therapy could be determined. All participants who received ≥1 dose of MK-1439A were included.

| End point type | Primary |
|---|---|

End point timeframe:

Up to Week 96

Notes:

[5] - No statistical analyses have been specified for this primary end point. It is expected there is at least one statistical analysis for each primary end point.
Justification: Per protocol, only descriptive statistics are presented.

| End point values | DOR/3TC/TDF | | | |
|---|---|---|---|---|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 10 | | | |
| Units: Percentage of Participants | | | | |
| number (not applicable) | 0.0 | | | |

### Statistical analyses

No statistical analyses for this end point

## Secondary: Percentage of Participants Achieving HIV-1 Ribonucleic Acid (RNA) <50 Copies/mL of Plasma at Week 96

| End point title | Percentage of Participants Achieving HIV-1 Ribonucleic Acid (RNA) <50 Copies/mL of Plasma at Week 96 |
|---|---|

End point description:

The percentage of participants achieving HIV-1 ribonucleic acid (RNA) <50 copies/mL in plasma at Week 96 was calculated. The Abbott RealTime HIV-1 Assay, which has a lower limit of reliable quantification (LoQ) of 40 copies/mL, was used to measure the HIV-1 RNA level in plasma samples obtained at Week 96 visit. All participants who received ≥1 dose of MK-1439A, had baseline and Week 96 data for HIV in plasma, and whose central lab results confirmed the presence of protocol-specified NNRTI resistance-associated mutations were included.

| End point type | Secondary |
|---|---|

End point timeframe:

Week 96

| End point values | DOR/3TC/TDF | | | |
|---|---|---|---|---|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 7 | | | |
| Units: Percentage of Participants | | | | |
| number (confidence interval 95%) | 100.0 (59.0 to 100.0) | | | |

### Statistical analyses

No statistical analyses for this end point

## Secondary: Percentage of Participants Achieving HIV-1 Ribonucleic Acid (RNA) <40 Copies/mL of Plasma at Week 48

| End point title | Percentage of Participants Achieving HIV-1 Ribonucleic Acid (RNA) <40 Copies/mL of Plasma at Week 48 |
|---|---|

End point description:

The percentage of participants achieving HIV-1 ribonucleic acid (RNA) <40 copies/mL in plasma at Week 48 was calculated. The Abbott RealTime HIV-1 Assay, which has a lower limit of reliable quantification (LoQ) of 40 copies/mL, was used to measure the HIV-1 RNA level in plasma samples obtained at Week 48 visit. Participants with reading below the LoQ were considered to have <40 copies/mL. All participants who received ≥1 dose of MK-1439A, had baseline and Week 48 data for HIV in plasma, and whose central lab results confirmed the presence of protocol-specified NNRTI resistance-associated

mutations were included.

| End point type | Secondary |
|---|---|

End point timeframe:

Week 48

| End point values | DOR/3TC/TDF | | | |
|---|---|---|---|---|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 8 | | | |
| Units: Percentage of Participants | | | | |
| number (confidence interval 95%) | 100.0 (63.1 to 100.0) | | | |

### Statistical analyses

No statistical analyses for this end point

## Secondary: Percentage of Participants Achieving HIV-1 Ribonucleic Acid (RNA) <40 Copies/mL of Plasma at Week 96

| End point title | Percentage of Participants Achieving HIV-1 Ribonucleic Acid (RNA) <40 Copies/mL of Plasma at Week 96 |
|---|---|

End point description:

The percentage of participants achieving HIV-1 ribonucleic acid (RNA) <40 copies/mL in plasma at Week 96 was calculated. The Abbott RealTime HIV-1 Assay, which has a lower limit of reliable quantification (LoQ) of 40 copies/mL, was used to measure the HIV-1 RNA level in plasma samples obtained at Week 96 visit. Participants with reading below the LoQ were considered to have <40 copies/mL. All participants who received ≥1 dose of MK-1439A, had baseline and Week 96 data for HIV in plasma, and whose central lab results confirmed the presence of protocol-specified NNRTI resistance-associated mutations were included.

| End point type | Secondary |
|---|---|

End point timeframe:

Week 96

| End point values | DOR/3TC/TDF | | | |
|---|---|---|---|---|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 7 | | | |
| Units: Percentage of Participants | | | | |
| number (confidence interval 95%) | 100.0 (59.0 to 100.0) | | | |

### Statistical analyses

No statistical analyses for this end point

## Secondary: Change from Baseline in CD4 Cell Count at Week 48

| End point title | Change from Baseline in CD4 Cell Count at Week 48 |
|---|---|

End point description:

The change from baseline in CD4 cell count at Week 48 was calculated. All participants who received ≥1 dose of MK-1439A, had baseline and Week 48 data for CD4 cell count, and whose central lab results confirmed the presence of protocol-specified NNRTI resistance-associated mutations were included.

| End point type | Secondary |
|---|---|

End point timeframe:

Baseline (Day 1) and Week 48

| **End point values** | DOR/3TC/TDF | | | |
|---|---|---|---|---|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 8 | | | |
| Units: Cells/mm^3 | | | | |
| arithmetic mean (confidence interval 95%) | | | | |
| Baseline for the Week 48 Population | 409 (293.5 to 525.0) | | | |
| Change from Baseline at Week 48 | 132 (24.4 to 239.8) | | | |

### Statistical analyses

No statistical analyses for this end point

## Secondary: Change from Baseline in CD4 Cell Count at Week 96

| End point title | Change from Baseline in CD4 Cell Count at Week 96 |
|---|---|

End point description:

The change from baseline in CD4 cell count at Week 96 was calculated. All participants who received ≥1 dose of MK-1439A, had baseline and Week 96 data for CD4 cell count, and whose central lab results confirmed the presence of protocol-specified NNRTI resistance-associated mutations were included.

| End point type | Secondary |
|---|---|

End point timeframe:

Baseline (Day 1) and Week 96

| **End point values** | DOR/3TC/TDF | | | |
|---|---|---|---|---|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 7 | | | |
| Units: Cells/mm^3 | | | | |
| arithmetic mean (confidence interval 95%) | | | | |
| Baseline for the Week 96 Population | 437 (323.9 to 550.7) | | | |
| Change from Baseline at Week 96 | 153 (23.0 to 282.8) | | | |

### Statistical analyses

No statistical analyses for this end point

## Secondary: Time to Loss of Virologic Response

| End point title | Time to Loss of Virologic Response |
|---|---|

End point description:

The time to loss of virologic response (TLOVR) was reported. For participants who achieved HIV-1 RNA <50 copies/mL of plasma and subsequently had two consecutive HIV-1 RNA values of ≥50 copies/mL measured at least 1 week apart, TLOVR was the time between Day 1 and the date of the first of the two consecutive values ≥50 copies/mL. For participants who achieved and sustained HIV-1 RNA <50 copies/mL, time to loss of virologic response was censored at the time of the last available measurement. All participants who experienced protocol-defined virologic failure, received ≥1 dose of MK-1439A, had baseline and later data for HIV in plasma, and whose central lab results confirmed the presence of protocol-specified NNRTI resistance-associated mutations were included. Participants who did not experience virologic failure were excluded from the analysis population.

| End point type | Secondary |
|---|---|

End point timeframe:

Up to Week 96

| **End point values** | DOR/3TC/TDF | | | |
|---|---|---|---|---|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 1 | | | |
| Units: Days | | | | |
| arithmetic mean (full range (min-max)) | 166 (166 to 166) | | | |

### Statistical analyses

No statistical analyses for this end point

## Other pre-specified: Percentage of Participants Achieving HIV-1 Ribonucleic Acid (RNA) <50 Copies/mL of Plasma at Week 192

| End point title | Percentage of Participants Achieving HIV-1 Ribonucleic Acid (RNA) <50 Copies/mL of Plasma at Week 192 |
|---|---|

End point description:

The percentage of participants achieving HIV-1 ribonucleic acid (RNA) <50 copies/mL in plasma at Week 192 was calculated. The Abbott RealTime HIV-1 Assay, which has a lower limit of reliable quantification (LoQ) of 40 copies/mL, was used to measure the HIV-1 RNA level in plasma samples obtained at Week 192 visit. All participants who received ≥1 dose of MK-1439A, had baseline and Week 192 data for HIV in plasma, and whose central lab results confirmed the presence of protocol-specified NNRTI resistance-associated mutations were included.

| End point type | Other pre-specified |
|---|---|

End point timeframe:

Week 192

| End point values | DOR/3TC/TDF | | | |
|---|---|---|---|---|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 4 | | | |
| Units: Percentage of Participants | | | | |
| number (confidence interval 95%) | 100.0 (39.8 to 100.0) | | | |

## Statistical analyses

No statistical analyses for this end point

## Other pre-specified: Percentage of Participants Achieving HIV-1 Ribonucleic Acid (RNA) <40 Copies/mL of Plasma at Week 192

| End point title | Percentage of Participants Achieving HIV-1 Ribonucleic Acid (RNA) <40 Copies/mL of Plasma at Week 192 |
|---|---|

End point description:

The percentage of participants achieving HIV-1 ribonucleic acid (RNA) <40 copies/mL in plasma at Week 192 was calculated. The Abbott RealTime HIV-1 Assay, which has a lower limit of reliable quantification (LoQ) of 40 copies/mL, was used to measure the HIV-1 RNA level in plasma samples obtained at Week 192 visit. Participants with reading below the LoQ were considered to have <40 copies/mL. All participants who received ≥1 dose of MK-1439A, had baseline and Week 192 data for HIV in plasma, and whose central lab results confirmed the presence of protocol-specified NNRTI resistance-associated mutations were included.

| End point type | Other pre-specified |
|---|---|

End point timeframe:

Week 192

| End point values | DOR/3TC/TDF | | | |
|---|---|---|---|---|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 4 | | | |
| Units: Percentage of Participants | | | | |
| number (confidence interval 95%) | 100.0 (39.8 to 100.0) | | | |

## Statistical analyses

No statistical analyses for this end point

## Other pre-specified: Change from Baseline in CD4 Cell Count at Week 192

| End point title | Change from Baseline in CD4 Cell Count at Week 192 |
|---|---|

End point description:

The change from baseline in CD4 cell count at Week 192 was calculated. All participants who received ≥1 dose of MK-1439A, had baseline and Week 192 data for CD4 cell count, and whose central lab results confirmed the presence of protocol-specified NNRTI resistance-associated mutations were included.

| End point type | Other pre-specified |
|---|---|

End point timeframe:

Baseline (Day 1) and Week 192

| **End point values** | DOR/3TC/TDF | | | |
|---|---|---|---|---|
| Subject group type | Reporting group | | | |
| Number of subjects analysed | 4 | | | |
| Units: Cells/mm^3 | | | | |
| arithmetic mean (confidence interval 95%) | | | | |
| Baseline for the Week 192 Population | 479 (310.0 to 648.5) | | | |
| Change from Baseline at Week 192 | 196 (27.4 to 364.1) | | | |

## Statistical analyses

No statistical analyses for this end point

## Adverse events

### Adverse events information

Timeframe for reporting adverse events:

Up to 192 weeks

Adverse event reporting additional description:

All participants who received ≥1 dose of study intervention are included in AE results. All-cause mortality is based on all randomized participants.

| | |
|---|---|
| Assessment type | Systematic |

### Dictionary used

| | |
|---|---|
| Dictionary name | MedDRA |
| Dictionary version | 23.1 |

### Reporting groups

| | |
|---|---|
| Reporting group title | DOR/3TC/TDF Study Extension: Week 97 to Week 192 |

Reporting group description:

Treatment-naïve HIV-1 infected participants with NNRTI transmitted resistance-associated mutations were treated with open-label MK-1439A (DOR/3TC/TDF 100mg/300mg/300mg) as a FDC tablet taken once daily by mouth from Day 1 to Week 96 in the Base Study.

| | |
|---|---|
| Reporting group title | DOR/3TC/TDF Base Study: Day 1 to Week 96 |

Reporting group description:

Treatment-naïve HIV-1 infected participants with NNRTI transmitted resistance-associated mutations were treated with open-label MK-1439A (DOR/3TC/TDF 100mg/300mg/300mg) as a FDC tablet taken once daily by mouth from Week 96 to Week 192 in the optional Extension Study.

| Serious adverse events | DOR/3TC/TDF Study Extension: Week 97 to Week 192 | DOR/3TC/TDF Base Study: Day 1 to Week 96 | |
|---|---|---|---|
| Total subjects affected by serious adverse events | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| number of deaths (all causes) | 0 | 0 | |
| number of deaths resulting from adverse events | 0 | 0 | |
| Immune system disorders | | | |
| Allergy to arthropod sting | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences causally related to treatment / all | 0 / 0 | 0 / 1 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

Frequency threshold for reporting non-serious adverse events: 5 %

| Non-serious adverse events | DOR/3TC/TDF Study Extension: Week 97 to Week 192 | DOR/3TC/TDF Base Study: Day 1 to Week 96 | |
|---|---|---|---|
| Total subjects affected by non-serious adverse events | | | |
| subjects affected / exposed | 5 / 6 (83.33%) | 9 / 10 (90.00%) | |

| | | | |
|---|---|---|---|
| Injury, poisoning and procedural complications | | | |
| Arthropod bite | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Exposure to communicable disease | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 2 | |
| Eye contusion | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Fall | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Hand fracture | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Cardiac disorders | | | |
| Palpitations | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Nervous system disorders | | | |
| Dizziness | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Dysaesthesia | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Dystonia | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Sciatica | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 2 / 10 (20.00%) | |
| occurrences (all) | 0 | 2 | |
| Taste disorder | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |

| | | | |
|---|---|---|---|
| General disorders and administration site conditions | | | |
| Pyrexia | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Fatigue | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 2 / 10 (20.00%) | |
| occurrences (all) | 0 | 2 | |
| Gastrointestinal disorders | | | |
| Abdominal discomfort | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 2 / 10 (20.00%) | |
| occurrences (all) | 0 | 4 | |
| Abdominal pain | | | |
| subjects affected / exposed | 1 / 6 (16.67%) | 1 / 10 (10.00%) | |
| occurrences (all) | 1 | 1 | |
| Constipation | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Anogenital dysplasia | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Diarrhoea | | | |
| subjects affected / exposed | 1 / 6 (16.67%) | 2 / 10 (20.00%) | |
| occurrences (all) | 1 | 2 | |
| Defaecation urgency | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Nausea | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 2 / 10 (20.00%) | |
| occurrences (all) | 0 | 4 | |
| Gastrointestinal tract irritation | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Dry mouth | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Vomiting | | | |

| | | | |
|---|---|---|---|
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 3 | |
| Reproductive system and breast disorders | | | |
| Menstruation irregular | | | |
| subjects affected / exposed | 1 / 6 (16.67%) | 0 / 10 (0.00%) | |
| occurrences (all) | 1 | 0 | |
| Penile discharge | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Respiratory, thoracic and mediastinal disorders | | | |
| Cough | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 2 | |
| Oropharyngeal pain | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Rhinorrhoea | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Sinus congestion | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Skin and subcutaneous tissue disorders | | | |
| Photosensitivity reaction | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Rash | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Psychiatric disorders | | | |
| Abnormal dreams | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Depression | | | |
| subjects affected / exposed | 1 / 6 (16.67%) | 0 / 10 (0.00%) | |
| occurrences (all) | 1 | 0 | |

| | | | |
|---|---|---|---|
| Insomnia | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Musculoskeletal and connective tissue disorders | | | |
| Arthralgia | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 2 / 10 (20.00%) | |
| occurrences (all) | 0 | 2 | |
| Back pain | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 4 / 10 (40.00%) | |
| occurrences (all) | 0 | 4 | |
| Neck pain | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 2 / 10 (20.00%) | |
| occurrences (all) | 0 | 2 | |
| Infections and infestations | | | |
| Chlamydial infection | | | |
| subjects affected / exposed | 1 / 6 (16.67%) | 0 / 10 (0.00%) | |
| occurrences (all) | 1 | 0 | |
| Bronchitis | | | |
| subjects affected / exposed | 1 / 6 (16.67%) | 0 / 10 (0.00%) | |
| occurrences (all) | 1 | 0 | |
| Hepatitis syphilitic | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Gonorrhoea | | | |
| subjects affected / exposed | 1 / 6 (16.67%) | 0 / 10 (0.00%) | |
| occurrences (all) | 1 | 0 | |
| Folliculitis | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Herpes simplex | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Infected cyst | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Lower respiratory tract infection | | | |

| | | | |
|---|---|---|---|
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Nasopharyngitis | | | |
| subjects affected / exposed | 1 / 6 (16.67%) | 3 / 10 (30.00%) | |
| occurrences (all) | 2 | 5 | |
| Influenza | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Otitis externa | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Oropharyngeal gonococcal infection | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Secondary syphilis | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Proctitis gonococcal | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Shigella infection | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Sinusitis | | | |
| subjects affected / exposed | 1 / 6 (16.67%) | 0 / 10 (0.00%) | |
| occurrences (all) | 1 | 0 | |
| Metabolism and nutrition disorders | | | |
| Decreased appetite | | | |
| subjects affected / exposed | 1 / 6 (16.67%) | 0 / 10 (0.00%) | |
| occurrences (all) | 1 | 0 | |
| Hyperlipidaemia | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |
| Vitamin D deficiency | | | |
| subjects affected / exposed | 0 / 6 (0.00%) | 1 / 10 (10.00%) | |
| occurrences (all) | 0 | 1 | |

## More information

### Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

| Date | Amendment |
|---|---|
| 09 August 2016 | AM1: The purpose for this amendment was to update study design and provide rationale/enrollment criteria for the Extension Study. |
| 05 June 2017 | AM2: The purpose of this amendment was to change the enrollment target. |

Notes:

### Interruptions (globally)

Were there any global interruptions to the trial? No

### Limitations and caveats

None reported