In the presence of EFV, TDF trough levels in the FDV 240 mg group were comparable with 123 received FDV 120 mg + PR: 66 with ritonavir booster protease inhibitor (PI/r)-based ART. The primary endpoint was SVR12 GMR. This study was funded by Boehringer Ingelheim. This presentation includes discussion of investigational drugs not approved for use in humans. FDV trough levels in patients who received FDV 240 mg with an EFV-based ARV regimen. There was no apparent increase in the incidence of gastrointestinal events with the addition DRV gMean trough level was lower with FDV than without FDV. Primary results are presented in oral presentation 23. Among 308 patients treated in STARTVerso4, 185 received FDV 240 mg + PR: 82 with EFV-based ART. Faldaprevir (FDV) is a potent inhibitor of HCV NS3/4A, with activity against HCV genotypes 1,2,4,5,6. Among patients receiving FDV 240 mg with EFV, 62% achieved SVR12 compared with 81% without EFV. To assess the effect of FDV on the steady-state trough concentrations of ARVs (EFV, DRV, TDF), 74 patients were treated with FDV + PR in a Phase III trial (Study Lilly U.S. with similar demographics and baseline characteristics). This study was funded by Boehringer Ingelheim. This presentation includes discussion of investigational drugs not approved for use in humans. FDV trough levels in patients who received FDV 240 mg with an EFV-based ARV regimen. There was no apparent increase in the incidence of gastrointestinal events with the addition DRV gMean trough level was lower with FDV than without FDV. Primary results are presented in oral presentation 23.