

Poster presentation

## Once-daily saquinavir (SAQ)/ritonavir (RTV) (2000/100 mg) with abacavir/lamivudine (600/300 mg) or tenofovir/emtricitabine (245/300 mg) in naïve patients

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### Background

In the past years, once-daily (QD) dosing of antiretroviral combination therapy has become an increasingly available treatment option for HIV-1+ patients.

### Methods

Open label study in which HIV-1+ patients treated with SAQ/RTV (1000/100 mg BID) and two NRTIs with HIV-RNA-PCR < 50 copies/ml were switched to SAQ/RTV(2000/100 mg QD) with unchanged NRTI-backbone. CD4-cells, HIV-RNA-PCR, SAQ and RTV drug-levels and metabolic parameters were compared.

### Summary of results

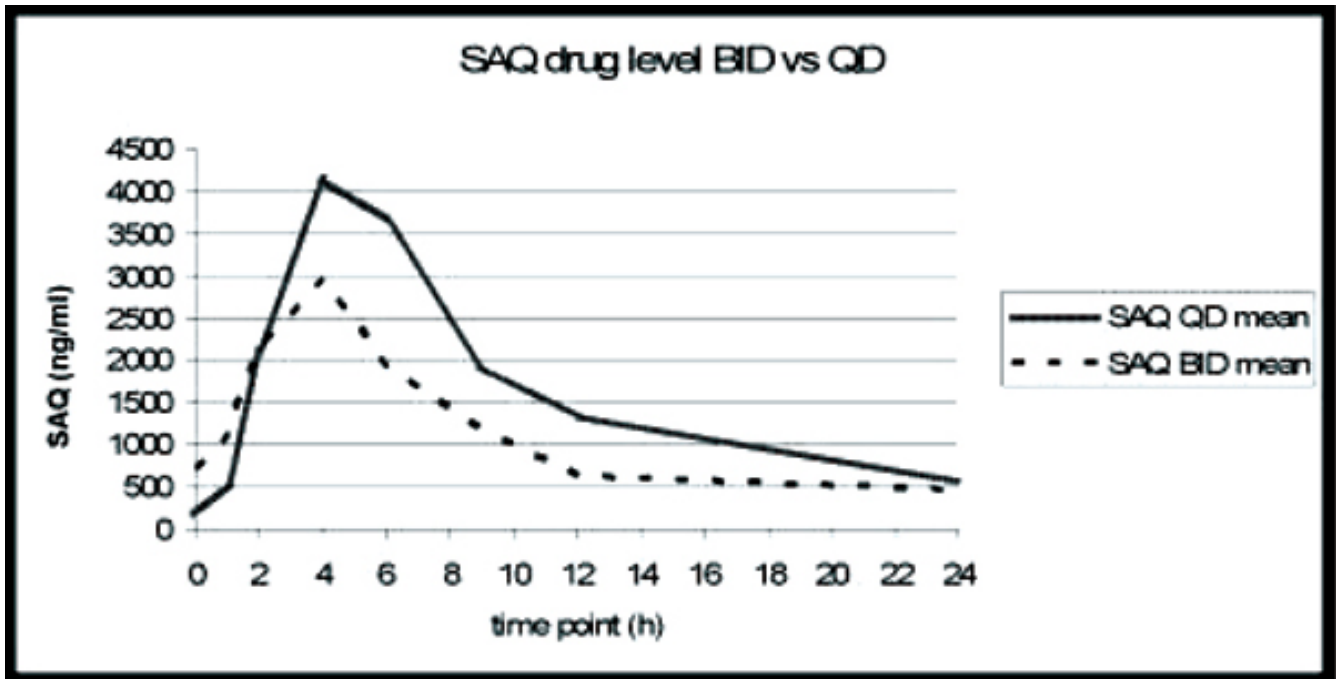
17 patients (15 male, 42 years), median CD4 456 ± 139/μl were included so far. The median follow-up time is 4 months. The HIV-RNA-PCR remained <50 copies/ml for all patients. Fasting metabolic parameters remained unchanged. The SAQ AUC 0–12 h were significantly higher when given QD vs. BID (median 29,400 vs. 18,500 ng\*h/ml; p = 0.009), whereas the C<sub>min</sub>, C<sub>max</sub> and AUC was lower for RTV when given QD vs. BID (7,400 vs. 11,700 ng\*h/ml; p = 0.02).

### Conclusion

In this ongoing study SAQ/RTV (2000/100 mg QD) was well tolerated and demonstrated higher SAQ and lower RTV drug levels as compared to the BID dosing schedule. (Table 1 and Figure 1.)

Table 1:

	baseline	month 3	p-value
Glucose [mg/dl]	91 ± 12	91 ± 10	0.9
Triglycerides [mg/dl]	178 ± 106	161 ± 96	0.7
Total chol. [mg/dl]	199 ± 43	206 ± 46	0.8
HDL chol. [mg/dl]	43 ± 9	44 ± 8	0.8
LDL chol. [mg/dl]	131 ± 31	133 ± 33	0.6



**Figure 1**  
SAQ drug level BID vs. QD.

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