Norvir up by 400%

Boosting price, not potency

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The protease inhibitor Norvir (ritonavir), approved in 1996, is most often used today to help other HIV meds give your virus the one-two punch. Now its maker, Abbott Laboratories, is boosting the booster's price—by about 400 percent, according to John Leonard, MD, who has long headed Abbott's Norvir research and development. Leonard says the hike will help pay to improve the PI, though this won't lessen the pill's common gastrointestinal side effects: Leonard says reformulation is meant to make Norvir more stable so it won't need refrigeration.

The boosted booster will cost $8.57 per 100-mg dose (old price: $1.71); Abbott's PI Kaletra (ritonavir plus lopinavir) won't go up. (Do they want you to switch from a Norvir-boosted competitor's PI to Kaletra?) Leonard adds that the original dose was 1,200 mg—about $20 a day—and that 80 percent of Norvir takers now take 100 mg, with only 1 percent on the heftier dose.

That's market share trumping medical care, and Abbott has a history of being sued over pricing practices. The hike shouldn't have much immediate impact on HIVers, according to Project Inform's Martin Delaney, who points out that the price Abbott charges ADAP is frozen at least until early 2005. And Abbott says it's expanding Norvir's Patient Assistance Program, "basically removing income limits," according to PR rep Nicole Wesley, so that all Norvir takers without private insurance or public assistance can get it free (call 800.222.6885).

But, Delaney adds, the longer-term results of this pill-ticket jack-up look less benign—forcing doctors to avoid prescribing regimens including Norvir and setting exorbitant standards for HIV med pricing. The AIDS Treatment Activist Coalition (ATAC) has sent a letter urging Abbott to "reconsider this shameful and destructive path."

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