

Poor Viral Control With Once-Daily Viramune, Viread and Epivir

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People on a once-a-day regimen of [Viramune](#) (nevirapine), [Viread](#) (tenofovir) and [Epivir](#) (lamivudine) had a very high risk of early virologic treatment failure, according to a study [published](#) in the February issue of the *Journal of Antimicrobial Chemotherapy*.

Researchers have been looking for ways to optimize the use of Viramune. Approved as a twice-daily medication, it is a leading treatment option for people new to antiretroviral (ARV) therapy. Its maker, Boehringer Ingelheim, is working on a longer-lasting formulation. In the meantime, scientists have conducted several studies of the existing formulation used once a day. Results, however, have not been consistent.

To explore the potential of once-daily Viramune in people starting ARV treatment for the first time, David Rey, MD from the Hôpitaux Universitaires, in Strasbourg, France, and his colleagues compared a once-daily Viramune regimen with a twice-daily Viramune regimen. The twice-daily regimen included Viramune and Epivir, but substituted [Retrovir](#) (zidovudine) for the Viread. Rey's team planned to enroll 250 patients in the study.

Rey and his colleagues quickly realized, however, that the once-a-day regimen was inferior. They conducted an unplanned interim analysis after just 71 patients had been recruited. The team found that 22.2 percent of those taking the once-daily regimen failed to respond to treatment right off the bat. In contrast, every patient on the twice-daily regimen had an initial response. Moreover, two people who had initially responded to the once-daily regimen later had a rebound of virus.

Confronted with this unanticipated result, the steering committee for the study stopped it early. The researchers state that the reason for the early failures on the once-daily regimen are not yet clear and require further research.