# Population analysis of plasma and intracellular pharmacokinetics of indinavir in HIV-1 infected patients with a stable antiretroviral therapy

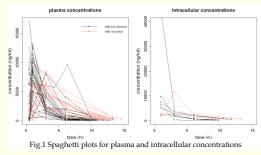
Dubois A<sup>(1)</sup>, Duval X<sup>(1,2)</sup>, Peytavin G<sup>(2)</sup>, Taburet AM<sup>(3)</sup>, Goujard C<sup>(3)</sup>, Mentré F<sup>(1,2)</sup> and the Cophar1-ANRS 102 Trial Group

- (1) INSERM, U738, Paris, France; University Denis Diderot, Paris, France.
- (2) AP-HP, Bichat University Hospital, Paris, France.
- (3) AP-HP, Bicêtre University Hospital, Paris, France.

- HIV protease inhibitor
  - Oligopeptides
  - > Prevent viral replication by inhibiting the activity of HIV-1 protease
    - No viral protein cleaving → Production of non infectious virons
    - Intracellular activity
- > Few studies on intracellular indinavir concentrations
  - ➤ In vitro studies on cellular accumulation [1, 2]
  - > Studies on patients
    - ➤ Correlation with MDR-1 gene expression and low dose of ritonavir [3]
    - ➤ Intracellular pharmacokinetics compare to plasma pharmacokinetics [4]
      - computation of AUC and t<sub>1/2</sub>
  - > No conjoint analysis of plasma and intracellular concentrations

To characterize the intracellular pharmacokinetics (PK) of indinavir in connection with its plasma PK in HIV infected patients with a stable antiretroviral therapy

- COPHAR1-ANRS 102 (feb. 2001- oct. 2002) [4]
  - Patients with
    - A stable antiretroviral treatment for 6 months
    - ➤ HIV RNA level < 200 copies/mL for at least 4 months
- Plasma concentrations
  - > 42 patients
    - > With different dosages of indinavir
    - 400mg to 1200mg twice or three times daily
    - > 13 patients with a booster dose of ritonavir
      - 400mg to 800 mg twice daily
  - > 5 sampling times
    - Before and at 0.5h, 1h, 3h, 6h after drug administration
- ➤ Intracellular concentrations
  - > 8 patients among the 42 patients
  - > 4 sampling times
    - > Before and at 1h, 3h, 6h after drug administration
    - > Cell preparation needing cautious handling
    - ➤ Cell freezing at -80°C until analysis
    - > Complex method of measurement



- Development of PK model for describing plasma and intracellular concentrations
- Nonlinear mixed effects model (NLMEM)

$$Y_{ij}^{(r)} = f(t_{ij}^{(r)}, \theta_i) + (a^{(r)} + b^{(r)} f(t_{ij}^{(r)}, \theta_i)) \times \varepsilon_{ij}^{(r)} \qquad \qquad \varepsilon_{ij}^{(r)} \sim N(0, 1)$$
  
$$\theta_i = \mu \times \exp(\beta) \times \exp(\eta_i) \qquad \qquad \eta_i \sim N(0, \Omega)$$

- r=1, 2 responses,  $i=1,...,N^{(r)}$  patients and  $j=1,...,n_i^{(r)}$  samples
- Parameter estimation: exact algorithm
  - > SAEM algorithm (Stochastic Approximation Expectation Maximisation) [5]
    - Implementation in MONOLIX (version 2.1) [6]
- Model building
- Model selection: Bayesian Information Criteria (BIC)

- Choice of pharmacokinetics model
  - Plasma concentrations described by a one or two-compartment model with first order absorption and first order elimination
    - > Evaluation of lag time for absorption
  - > Intracellular concentrations proportional to plasma concentrations or described by an additionnal compartment with transfert rate constants between plasma and intracellular compartment
- - Covariate model: effect of ritonavir
  - Random effects model
    - Variance
    - Correlation between random effects

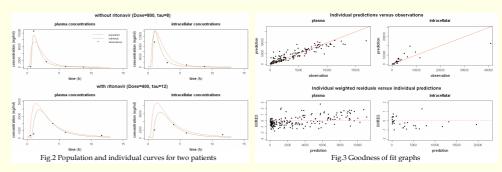
### Results

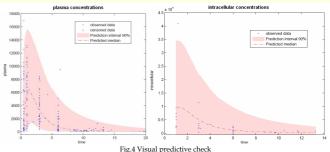
- > Joint model
  - ▶ Plasma concentrations described with a two-compartment model
  - Intracellular concentrations proportional to plasma concentrations  $Y_{ii}(cell) = \delta \times Y_{ii}(plasm)$
  - Lag time for absorption (LRT: p<10-16)
  - Effect of ritonavir on clearance (LRT: p=2.7 10-5)

	Parameter	Fixed effect (rse %)	Variation coefficient (rse %)	
	Tlag (h)	0.358 (19.4)	75.9% (19.9)	Par
	k <sub>a</sub> (h -1)	1.86 (28.4)	79.4% (20.8)	1 4
	V <sub>p</sub> /F(L)	55.0 (13.7)	/	а
	Cl/F (L/h)	44.1 (8.4)	40.9% (10.9)	ŀ
	k <sub>12</sub> (h -1)	0.0842 (41.2)	/	
	k <sub>21</sub> (h-1)	0.221 (37.7)	/	
	δ (-)	1.84 (19.3)	38.7% (50.9)	
	β(rito, Cl) (-)	-0.715 (20.1)	/	

Parameter	estimates (rse %)
a <sup>(plasm)</sup>	6.78 (96.0)
b(plasm)	39.5% (8.2)
a <sup>(cell)</sup>	254 (0.1)
b(cell)	48.1% (24.9)

Tab.1 Population parameters estimates for joint pharmacokinetic model





## Discussion

- > Intracellular concentrations at steady state proportional to plasma concentrations
  - Consistant with no cellular accumulation of indinavir [1, 2, 3]
- COPHAR1 ANRS 102
  - Concentration measurement during a second visit
    - > Estimation of within-subject variability
- COPHAR2 ANRS 111
  - > Intracellular and plasma concentrations of indinavir
    - Validation of developped model
- Nascimbeni, Lamotte, Peytavin et al. Antimicrob Agents Chemother. 2000
  Ford, Khoo, Back. Antimicrob Agents Chemother. 2004
  Chaillou, Durant, Garrafo et al. HIV Clin Trials. 2002.
  Hennessy, Clarke, Spiers et al. Antivir Ther. 2003

- [5] Goujard, Legrand, Panhard et al. Clin Pharmacokinet. 2005[6] Delyon, Lavielle, Moulines. Ann Stat. 1999
- [7] http://www.monolix.org