

## Lopinavir PK Fact Sheet

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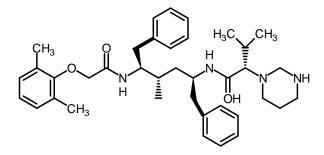
### **Details**

Generic Name Lopinavir
Trade Name Kaletra®

Class Protease Inhibitor

Molecular Weight 628.80

Structure



### **Summary of Key Pharmacokinetic Parameters**

Plasma half life 5-6 h

Cmax  $9.6 \pm 4.4 \,\mu\text{g/ml}$  (400/100 mg twice daily Kaletra dosing) Cmin  $5.5 \pm 4.0 \,\mu\text{g/ml}$  (400/100 mg twice daily Kaletra dosing) AUC  $82.8 \pm 44.5 \,\mu\text{g/ml.hr}$  (400/100 mg twice daily Kaletra dosing)

Bioavailability Not established in humans

Absorption Administration of a single 400/100 mg dose of Kaletra tablets under fed conditions (high fat, 872

kcal, 56% from fat) compared to fasted state was associated with no significant changes in Cmax and AUC. Kaletra tablets may be taken with or without food. Kaletra tablets have also shown less pharmacokinetic variability under all meal conditions compared to Kaletra soft capsules.

Protein Binding 98-99%

Volume of Distribution Not available

CSF:Plasma ratio Consistently undetectable

Semen:Plasma ratio 0.07 [1] Renal Clearance <3%

Renal Impairment Pharmacokinetics have not been studied in patients with renal insufficiency; since the renal

clearance of lopinavir is negligible, a decrease in total body clearance is not expected.

Hepatic Impairment In mild to moderate hepatic impairment, an increase of approximately 30% in lopinavir exposure

has been observed, but is not expected to be clinically relevant. No data are available in patients

with severe hepatic impairment; Kaletra should not be given to these patients.



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### **Metabolism and Distribution**

Metabolised by CYP3A

Inhibitor of CYP3A, BCRP(In vitro) [2]

N/A

Transported by P-glycoprotein, MRP1, MRP2, hOATPs [3]

### References

Inducer of

Unless otherwise stated (see below), information is from: Kaletra® Summary of Product Characteristics, AbbVie Ltd. Kaletra® US Prescribing Information, AbbVie Inc.

- 1. Lafeuillade A, Solas C, Halfon P, *et al.* Differences in the detection of three HIV-1 protease inhibitors in non-blood compartments: clinical correlations. *HIV Clin Trials*. 2002; 3(1): 27-35.
- 2. Weiss J, Rose J, Storch CH, et al. Modulation of human BCRP (ABCG2) activity by anti-HIV drugs. J Antimicrob Chemother. 2007; 59(2): 238-245.
- 3. Janneh O, Hartkoorn RC, Jones E, et al. Cultured CD4T cells and primary human lymphocytes express hOATPs: intracellular accumulation of saquinavir and lopinavir. *Br J Pharmacol.* 2008; 155(6): 875-883.