



Data Presented at International AIDS Society (IAS) Conference Shows Long-Term Viramune(R) (nevirapine) Efficacy and Increase in Good Cholesterol

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Sydney, Australia (ots/PRNewswire) -

New data from two new studies of Viramune(R) (nevirapine) were presented at the 4th International AIDS Society (IAS) in Sydney, Australia. Results from an extended three-year follow-up analysis of the 2NN study demonstrated that HIV-positive patients taking VIRAMUNE (nevirapine) achieved a comparable virologic and immunologic response to patients taking efavirenz. The second study, NILE, examined the mechanism by which VIRAMUNE increases the level of high-density lipoprotein cholesterol (HDLc, also called "good cholesterol" because of its cardioprotective character) and confirmed again that VIRAMUNE increases HDL-cholesterol through 24 weeks.

"These studies show how to further maximise the benefits of treatment with VIRAMUNE. The findings of the NILE study are particularly encouraging as it was thought that some therapies for HIV may increase cardiovascular risk. What NILE has shown is that VIRAMUNE may increase good cholesterol in a manner which might be expected to reduce cardiovascular risk, and therefore, the study may help us identify promising novel targets for increasing good cholesterol," Peter Reiss, Professor of Medicine, Academic Medical Centre, Amsterdam, Netherlands.

NILE (Nevirapine Intensive Lipid Evaluation)

The NILE study examined the way that VIRAMUNE increases HDL-cholesterol in 13 HIV positive patients with viral loads of 250 cells/mm³ are at the greatest risk. By application of the VIRAMUNE CD4+ guidelines the risk of hepatic events can be dramatically reduced. VIRAMUNE should not be initiated in adult females with CD4+ cell counts greater than 250 cells/mm³ or in adult males with CD4+ cell counts greater than 400 cells/mm³ unless the benefit outweighs the risk. The greatest risk of severe rash and hepatic events occurs in the first six weeks of therapy. It is essential that patients be monitored for these reactions at all times, and intensively during the first few months of therapy. VIRAMUNE should be discontinued and not restarted following severe hepatic, skin or hypersensitivity reactions.

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Boehringer Ingelheim is committed to the research and development of novel antiretroviral agents. Apart from Viramune(R) (nevirapine), Aptivus(R) (tipranavir) is a new non-peptidic protease inhibitor, approved for combination antiretroviral treatment of HIV-1 infected adults that are highly pre-treated with virus resistant to multiple protease inhibitors. The company is committed to improving HIV therapy by providing physicians and patients with innovative antiretrovirals.

Boehringer Ingelheim is actively conducting clinical trial programs to further evaluate VIRAMUNE and APTIVUS for the treatment of HIV-1 infection. Boehringer Ingelheim recently announced the initiation of the ArTEN trial, which will compare the efficacy and safety of VIRAMUNE dosed once-or twice-daily versus atazanavir boosted with ritonavir in HIV-positive antiretroviral-naïve patients. The APTIVUS clinical trial program is comprised of ongoing and planned studies in more than 1,400 treatment-experienced patients, including the SPRING study, which is examining the benefits of APTIVUS in an ethnically and racially diverse highly treatment-experienced patient population and the POTENT study, which will compare the efficacy and safety of APTIVUS versus darunavir.

For more information on Boehringer Ingelheim, please see www.boehringer-ingelheim.com/hiv

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Reference:

Wit, F. et al. Three-year extended follow-up of the 2NN study: a randomised comparative trial of first-line antiretroviral therapy with regimens containing either nevirapine, efavirenz or both drugs combined, together with stavudine and lamivudine. 4th International AIDS Society (IAS) Conference on HIV Pathogenesis and Treatment; Sydney, Australia. Abstract #WEPEB032

Sankatsing, R. et al. Nevirapine increases High Density Lipoprotein-cholesterol by stimulation of apolipoprotein AI synthesis. 4th International AIDS Society (IAS) conference on HIV Pathogenesis and Treatment; Sydney, Australia. Abstract #WEPEB120LB

@@start.t2@@ (i) The U.S. Centers for Disease Control and Prevention (CDC) disease staging system assesses the severity of HIV disease by CD4 cell counts and by the presence of specific HIV-related conditions. Category B events are symptomatic conditions of HIV infection in adolescents or adults. Category C events are AIDS-indicator conditions, such as recurrent bacterial pneumonia, coccidioidomycosis and histoplasmosis. (Source: AIDS Education and Training Centers (AETC) National Resource Center)@@end@@

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