# Etravirine PK Fact Sheet





## Details

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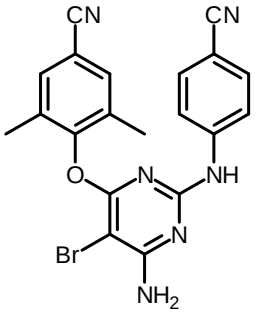
| *Generic Name* | Etravirine (TMC125) |
| *Trade Name* | Intelence® |
| *Class* | Non-Nucleoside Reverse Transcriptase Inhibitor |
| *Molecular Weight* | 435.28 |
| *Structure* |  |



## Summary of Key Pharmacokinetic Parameters

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| *Plasma half life* | 41 h |
| *Cmax* | No data |
| *Cmin** | 297 ± 391 ng/ml (geometric mean ± sd); 298.8 (2-4852) ng/ml (median range) |
| *AUC** | 4522 ± 4710 ng/ml.h (geometric mean ± sd); 4380 (458-59084) ng/ml.h, (median, range) |

**Data are from a clinical trial where patients received darunavir/ritonavir 600/100 mg bd as part of their background regimen. Pharmacokinetic estimates account for reduction in parameters due to co-administration.*

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| *Bioavailability* | Absolute oral bioavailability is unknown |
| *Absorption* | The systemic exposure (AUC) to etravirine was decreased by about 50% when etravirine was administered under fasting conditions, as compared to administration following a meal. Therefore, etravirine should be taken following a meal. |
| *Protein Binding* | 99.9% |
| *Volume of Distribution* | No data |
| *CSF:Plasma ratio* | Not determined in humans |
| *Semen:Plasma ratio* | Not determined in humans |
| *Renal Clearance* | <1.2% |
| *Renal Impairment* | A decrease in clearance is not expected in patients with renal impairment. |
| *Hepatic Impairment* | No dose adjustment is required in patients with mild (Child-Pugh Class A) or moderate (Child-Pugh Class B) hepatic impairment. Pharmacokinetics have not been evaluated in severe hepatic impairment (Child-Pugh Class C). |

## Metabolism and Distribution

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| *Metabolised by* | CYP3A4, CYP2C9, CYP2C19 |
| *Inducer of* | CYP3A4 |
| *Inhibitor of* | CYP2C9, CYP2C19 |
| *Transported by* | Unknown |

## References

*Unless otherwise stated (see below), information is from:*

Intelence® Summary of Product Characteristics, Janssen-Cilag Ltd.
Intelence® US Prescribing Information, Janssen Pharmaceuticals Inc.