**Glecaprevir PK Fact Sheet**

**Details**

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Generic Name</strong></td>
<td>Glecaprevir</td>
</tr>
<tr>
<td><strong>Trade Name</strong></td>
<td>Maviret®, Mavyret®, (co-formulated with pibrentasvir)</td>
</tr>
<tr>
<td><strong>Class</strong></td>
<td>HCV NS3/4A inhibitor</td>
</tr>
<tr>
<td><strong>Molecular Weight</strong></td>
<td>838.87</td>
</tr>
<tr>
<td><strong>Structure</strong></td>
<td><img src="image" alt="Glecaprevir Structure" /></td>
</tr>
</tbody>
</table>

**Summary of Key Pharmacokinetic Parameters**

Glecaprevir is available in a fixed-dose combination product with pibrentasvir.

- **Linearity/non-linearity**: Glecaprevir AUC increases in a greater than dose-proportional manner (1200 mg once daily had 516-fold higher exposure than 200 mg once daily) which may be related to saturation of uptake and efflux transporters.

- **Steady state**: Achieved after 7 days of once daily dosing \(^1\)

- **Plasma half-life**: 6-9 h

- **Cmax**: 597 (114) ng/mL (geometric mean, %CV), in non-cirrhotic HCV-infected subjects

- **C24**: 3.07 (54), 5.50 (46), 3.72 (71) ng/mL (geometric mean, %CV), in healthy White, Han Chinese and Japanese adults, respectively \(^2\)

- **AUC**: 4800 (122) ng·h/mL (geometric mean, %CV), in non-cirrhotic HCV-infected subjects

- **Bioavailability**: Not reported

- **Absorption**: Compared to fasting, a moderate to high-fat meal increased glecaprevir exposure by 83-163%.

- **Protein Binding**: 97.5%

- **Volume of Distribution**: Not reported

- **CSF:Plasma ratio**: Not reported

- **Semen:Plasma ratio**: Not reported

- **Renal Clearance**: 0.7% of dose excreted in urine

- **Renal Impairment**: No dosage adjustment is required in patients with mild, moderate or severe renal impairment, including those on dialysis.

- **Hepatic Impairment**: No dose adjustment is required in patients with mild hepatic impairment (Child-Pugh A). Glecaprevir is not recommended in patients with moderate hepatic impairment (Child-Pugh B) and is contraindicated in patients with severe hepatic impairment (Child-Pugh C).
### Metabolism and Distribution

**Metabolised by**
- CYP3A (minimal) – glecaprevir is mainly eliminated by biliary/faecal excretion

**Inducer of**
- None expected

**Inhibitor of**
- Inhibitor of P-gp, BCRP, OATP1B1, OATP1B3, BSEP.
- Weak inhibitor of CYP3A, CYP1A2, UGT1A1 (significant interactions are not expected with substrates of these enzymes).
- Significant inhibition of CYP2C9, CYP2C19, CYP2D6, UGT1A6, UGT1A9, UGT1A4, UGT2B7, OCT1, OCT2, OAT1, OAT3, MATE1 or MATE2K are not expected.

**Transported by**
- P-gp, BCRP, OATP1B1, OATP1B3

### References

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

Maviret Summary of Product Characteristics, AbbVie Ltd.
Mavyret Prescribing Information, AbbVie Inc.
