

# Second-line Anti-Retroviral therapy in Africa: a randomised trial to evaluate the feasibility of maintenance monotherapy with ritonavir-boosted lopinavir (Aluvia® tablets) following initiation with 24 weeks of combination therapy in second-line anti-retroviral therapy in Africa

<b>Submission date</b> 02/04/2007	<b>Recruitment status</b> No longer recruiting	<input checked="" type="checkbox"/> Prospectively registered
<b>Registration date</b> 31/05/2007	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 18/12/2017	<b>Condition category</b> Infections and Infestations	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

Protocol serial number

N/A

## Study information

### Scientific Title

Second-line Anti-Retroviral therapy in Africa: a randomised trial to evaluate the feasibility of maintenance monotherapy with ritonavir-boosted lopinavir (Aluvia® tablets) following initiation with 24 weeks of combination therapy in second-line anti-retroviral therapy in Africa

### Acronym

SARA

### Study objectives

The use of ritonavir-boosted lopinavir (as Aluvia® tablets) monotherapy is an important simplification approach for second-line antiretroviral therapy in resource-limited settings.

### Ethics approval required

Old ethics approval format

### Ethics approval(s)

1. Medicines Control Authority of Zimbabwe (MCAZ). Date of approval: 06/06/2007 (ref: B279/5/67/2007)
2. Medical Research Council of Zimbabwe (MRCZ) Date of approval: 03/03/2007 (ref: MRCZ/A/1378)
3. Ugandan National Council for Science and Technology (UNCST) Date of approval: 20/06/2007 (ref: MV 710)
4. Ugandan Virus Research Institute (UVRI SEC) Date of approval: 20/04/2007 (ref: GC/127/04/07)

### Study design

Three-centre open-label randomised pilot trial

### Primary study design

Interventional

### Study type(s)

Treatment

### Health condition(s) or problem(s) studied

HIV/AIDS

### Interventions

Comparison of two strategies for second-line antiretroviral therapy after 24 weeks of combination Aluvia® (or Kaletra®)-containing antiretroviral therapy:

Arm 1: Continued combination Aluvia-containing antiretroviral therapy

Arm 2: Maintenance with Aluvia monotherapy

The dose of Aluvia is 2 tablets twice a day (each tablet is 200 mg of lopinavir with 50 mg of ritonavir) for both arms. All drugs are taken orally.

Each patient will be randomized to one of the two arms on enrolment and start receiving the corresponding therapy until the end of the trial (September 2009). The randomization will be carried out in a 1:1 ratio.

### **Intervention Type**

Drug

### **Phase**

Not Specified

### **Drug/device/biological/vaccine name(s)**

Lopinavir and ritonavir (Aluvia®/Kaletra®)

### **Primary outcome(s)**

1. Change in CD4 count at 24 weeks after randomisation (efficacy)
2. Any Serious Adverse Event (SAE), which is not HIV related only (safety)

### **Key secondary outcome(s)**

1. Progression to a new or recurrent WHO stage 4 HIV event or death
2. Progression to a new or recurrent WHO stage 3 or 4 HIV event or death
3. Change in CD4 count from SARA randomisation to 48, 72 and 96 weeks
4. Any grade 3 or 4 adverse events
5. HIV RNA viral load (performed retrospectively) at 12, 24, 36, 48, 72 and 96 weeks
6. Adherence as measured by questionnaire and pill counts
7. Health economic outcomes

### **Completion date**

30/09/2009

## **Eligibility**

### **Key inclusion criteria**

1. Enrolled in the DART trial (ISRCTN13968779 at <http://www.controlled-trials.com/ISRCTN13968779>)
2. Failed first-line antiretroviral therapy (clinically/immunologically) and having completed 24 weeks of second-line combination antiretroviral therapy including ritonavir-boosted lopinavir (as either Aluvia® heat-stable tablets or Kaletra® capsules)
3. Documented informed consent
4. Life expectancy of at least 3 months

### **Participant type(s)**

Patient

### **Healthy volunteers allowed**

No

### **Age group**

Not Specified

### **Sex**

All

**Key exclusion criteria**

Pregnant or breast-feeding

**Date of first enrolment**

25/07/2007

**Date of final enrolment**

30/09/2009

## Locations

**Countries of recruitment**

United Kingdom

England

Uganda

Zimbabwe

**Study participating centre**

**Faculty of Medicine**

London

United Kingdom

W2 1PG

## Sponsor information

**Organisation**

Medical Research Council Clinical Trials Unit (UK)

**ROR**

<https://ror.org/001mm6w73>

## Funder(s)

**Funder type**

Government

**Funder Name**

Medical Research Council (UK)

**Alternative Name(s)**

Medical Research Council (United Kingdom), UK Medical Research Council, Medical Research Committee and Advisory Council, MRC

**Funding Body Type**

Government organisation

**Funding Body Subtype**

National government

**Location**

United Kingdom

## Results and Publications

### Individual participant data (IPD) sharing plan

**IPD sharing plan summary**

Not provided at time of registration

**Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/01/2012		Yes	No