ISRCTN68035289 https://doi.org/10.1186/ISRCTN68035289

Interaction between human immunodeficiency virus (HIV) drugs (non-nucleoside reverse transcriptase inhibitors [NNRTIs]) and anti-platelet agents

Submission date
28/10/2009

Recruitment status
No longer recruiting

Registration date
17/12/2009

Overall study status
Completed

Last Edited
19/05/2022

Condition category
Infections and Infestations

[_] Prospectively registered
[_] Protocol
[_] Statistical analysis plan
[X] Results
[_] 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

EudraCT/CTIS number
2008-006371-67

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers
RLBUHT 3729

Study information

Scientific Title
Effect of thienopyridine derivative (clopidogrel) on the disposition of efavirenz and neviparine in human immunodeficiency virus (HIV) positive patients: a randomised single-phase multi-dose proof-of-concept study

Study objectives
The plasma concentration of non-nucleoside reverse transcriptase inhibitors (NNRTIs) (nevirapine and efavirenz) may be pharmacologically enhanced in-vivo through inhibition of CYP2B6 with clopidogrel.

Ethics approval required
Old ethics approval format

Ethics approval(s)
National Research Ethics Service (Northwest Research Ethics Committee) (UK) approved on the 28th August 2009 (ref: 09/H1010/6)

Study design
Open-label sequential randomised single phase multi-dose proof-of-concept study

Primary study design
Interventional

Secondary study design
Randomised controlled trial

Study setting(s)
Hospital

Study type(s)
Treatment

Participant information sheet
Not available in web format, please use the contact details below to request a patient information sheet

Health condition(s) or problem(s) studied
Human immunodeficiency virus (HIV)

Interventions
Study patients on nevirapine should be receiving 200 mg 12-hourly. Study patients on efavirenz who are taking 600 mg at night would be converted to 600 mg in the morning as follows: 400 mg mane, 200 mg nocte for 1 day, then 600 mg for 1 day followed by the study day.

Study Day 1:
Patients are fasted from midnight and attend at 08:00 hours without taking their pills. After breakfast and blood sampling for pharmacokinetic profiles patients would then be administered initial dose of clopidogrel (Plavix®, 75 mg once daily; Sanofi Synthelabo, Guildford, United Kingdom) and would self-administer the remaining dose at home for the remaining 6 days.

Joint sponsor details:
The University of Liverpool (UK)
Pembroke Place
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Intervention Type
Drug

Phase
Not Applicable

Drug/device/biological/vaccine name(s)
Efavirenz, nevirapine, clopidogrel

Primary outcome measure
Absolute change (demonstrated by significant difference) in plasma AUC of efavirenz alone or nevirapine alone if the respective 90% classical confidence interval for geometric mean ratio lies within 0.80 - 1.25 of the reference AUC 0 - 24 hours.

All measures determined at the end of the study duration and data analysis (entire study duration is 8 days and data analysis approximately 3 weeks to a month).

Secondary outcome measures
1. Change in Cmax, Cmin, and weight-corrected apparent oral clearance (CL/F)/kg of efavirenz /nevirapine
2. Safety and tolerability of co-administration of clopidogrel and efavirenz/nevirapine

All measures determined at the end of the study duration and data analysis (entire study duration is 8 days and data analysis approximately 3 weeks to a month).

Overall study start date
15/11/2009

Completion date
15/12/2009

Eligibility

Key inclusion criteria
1. Aged greater than 18 years, either sex
2. On efavirenz (EFV) or nevirapine (NVP) containing regimen for greater than or equal to 6 months

3. Viral load less than or equal to 40 copies/ml and any CD4 count
4. No laboratory evidence of NNRTI toxicity:
4.1. Alanine aminotransferase (ALT) less than or equal to upper limit of normal (ULN)
4.2. Bilirubin less than or equal to ULN
4.3. Albumin greater than or equal to 30 g
4.4. Creatinine less than or equal to ULN
5. Not pregnant (for contraception, patients would be advised to use non-oestrogen based contraceptive devices)
6. No inter-current acute illness
7. No past medical history of coronary heart disease
8. No history of bleeding diathesis
9. No history of allergy to thienopyridines

Participant type(s)
Patient

Age group
Adult

Lower age limit
18 Years

Sex
Both

Target number of participants
37

Key exclusion criteria
1. Unable to provide informed consent
2. Known or suspected poor adherence to anti-retroviral therapy (ART)
3. Continuing intravenous (IV) drug user
4. On a HIV protease inhibitor or any known P450 inhibitors or inducers
5. Platelets less than or equal to 100 x 10^9/l
6. Neutrophils less than or equal to 1.0 x 10^9/ml

Date of first enrolment
15/11/2009

Date of final enrolment
15/12/2009

Locations

Countries of recruitment
England

United Kingdom

Study participating centre
Professor and Hon Consultant Infectious Diseases
Liverpool
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Sponsor information

Organisation
Royal Liverpool University Hospital and the University of Liverpools Biomedical Research Centre (UK)

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Sponsor type
Government

ROR
https://ror.org/01ycr6b80

Funder(s)

Funder type
Government

Funder Name
National Institute for Health Research (NIHR) (UK) - through the Royal Liverpool University Hospital and the University of Liverpools Biomedical Research Centre (ref: UoL000399. R&D 3729)

Results and Publications

Publication and dissemination plan
Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan
Not provided at time of registration

IPD sharing plan summary
Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Basic results		08/09/2021	19/05/2022	No	No
HRA research summary			28/06/2023	No	No