

Darunavir/r versus Lopinavir/r in Treatment-Naïve  
**ARTEMIS Trial**

# Once Daily Darunavir/r versus Lopinavir/r in Treatment-Naïve ARTEMIS: Study Design

## Study Design: ARTEMIS

- **Background:** Randomized, open-label phase 3 trial comparing the efficacy and safety of once-daily darunavir/ritonavir with lopinavir/ritonavir in treatment-naïve patients with HIV infection
- **Inclusion Criteria (n = 689)**
  - Age  $\geq 18$
  - Antiretroviral-naïve patients
  - HIV RNA  $\geq 5000$  copies/mL
  - No AIDS-defining illness
- **Treatment Arms**
  - DRV 800 mg QD + RTV 100 mg QD + TDF-FTC
  - LPV/r 800/200 mg QD (or 400 mg bid) + TDF-FTC

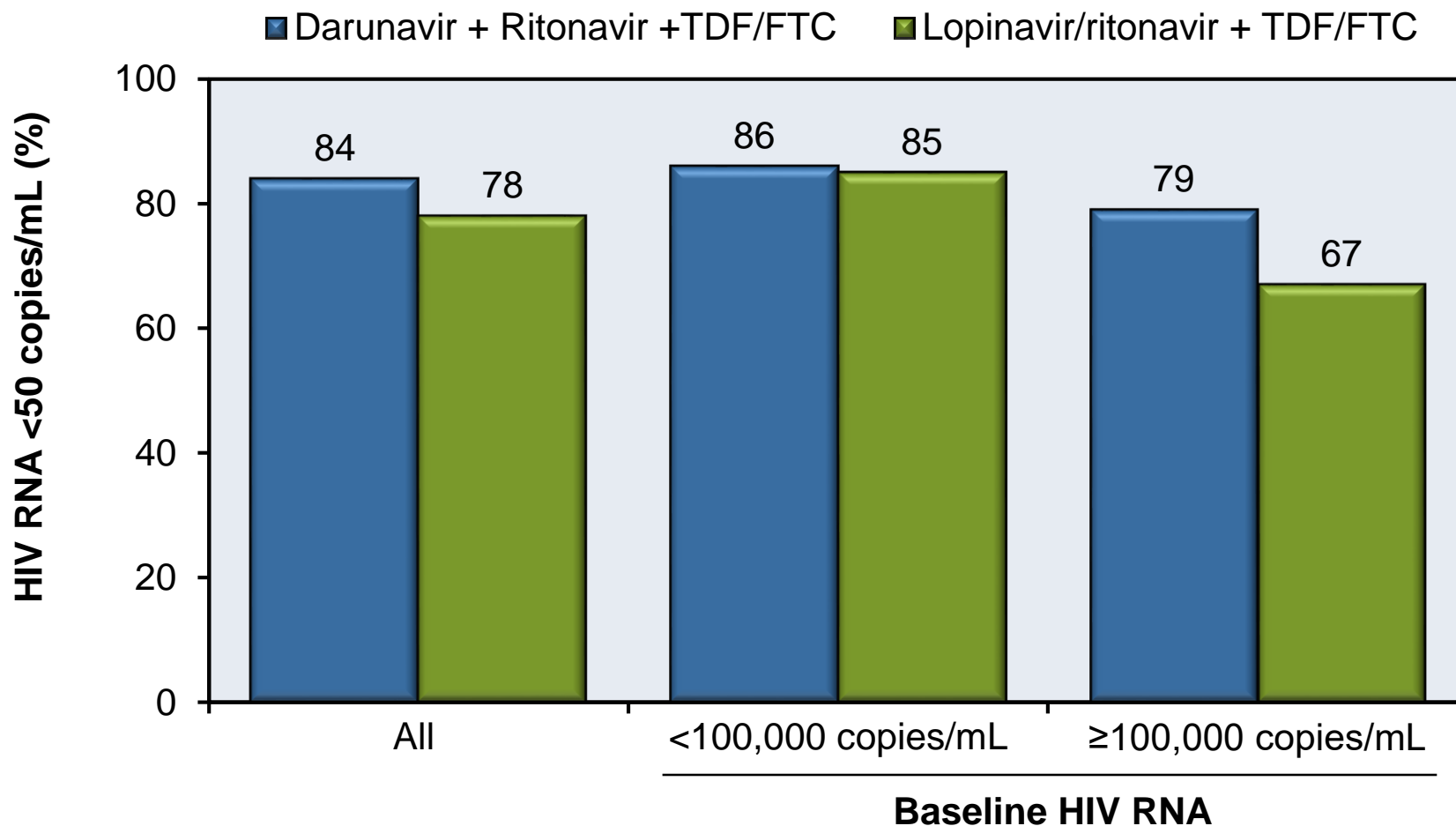
**DRV + RTV + TDF-FTC**  
(n = 343)

**LPV/RTV + TDF-FTC**  
(n = 346)

**ARTEMIS** = AntiRetroviral Therapy with TMC114 ExaMined In naive Subjects

# Once Daily Darunavir/r versus Lopinavir/r in Treatment-Naïve ARTEMIS: Results at 48 Weeks

Week 48: Virologic Response (Intent-to-Treat Analysis)



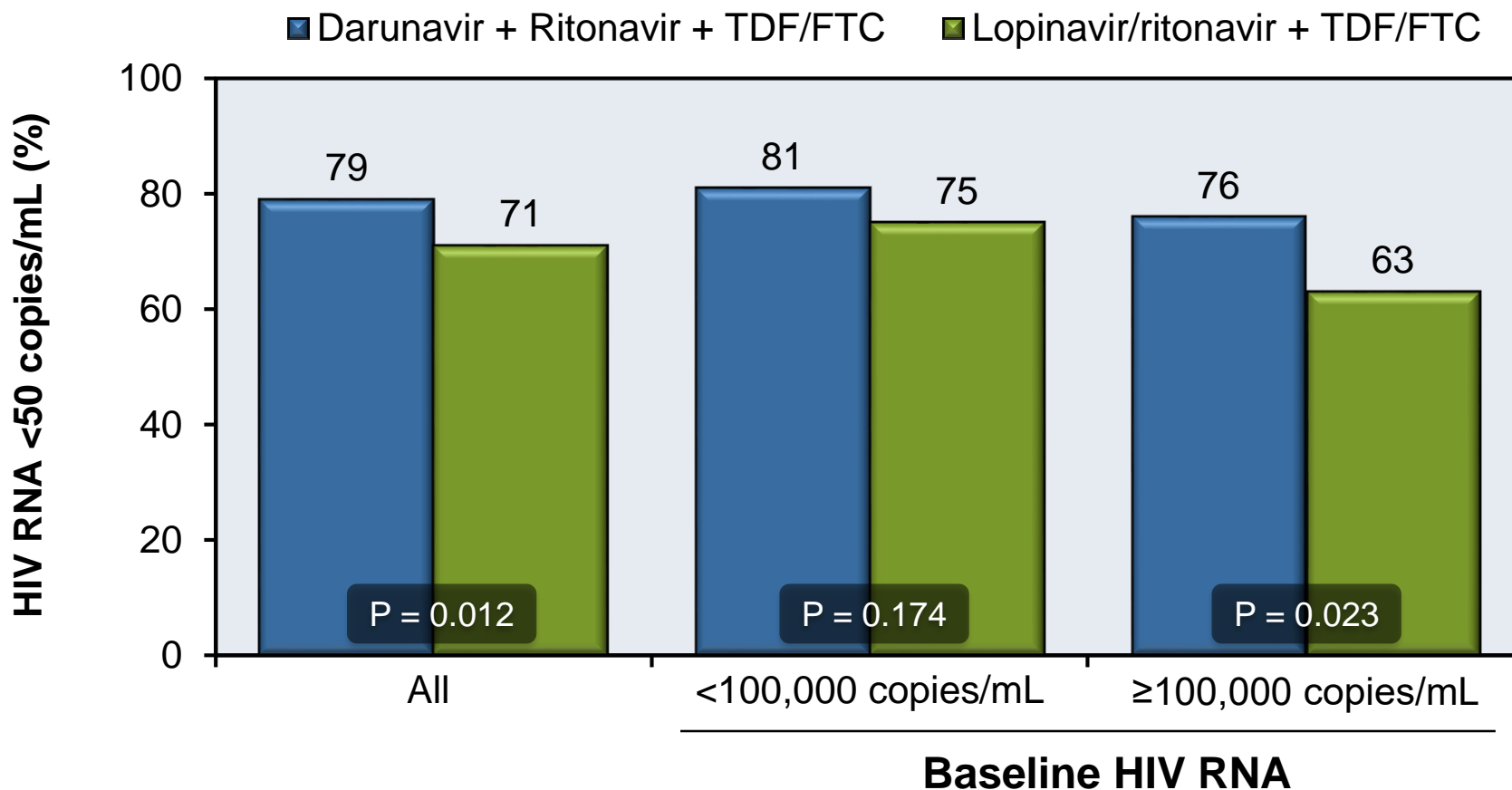
Source: Ortiz R, et al. AIDS. 2008;22:189-97.

# Once Daily Darunavir/r versus Lopinavir/r in Treatment-Naïve ARTEMIS: Conclusions (48 Week Data)

**Conclusion:** “DRV/r 800/100 mg qd was non-inferior to LPV/r 800/200 mg at 48 weeks, with a more favorable safety profile. Significantly higher response rates were observed with DRV/r in patients with HIV-1 RNA at least 100 000 copies/ml. DRV/r 800/100 mg offers a new effective and well tolerated once-daily, first-line treatment option for treatment-naïve patients.”

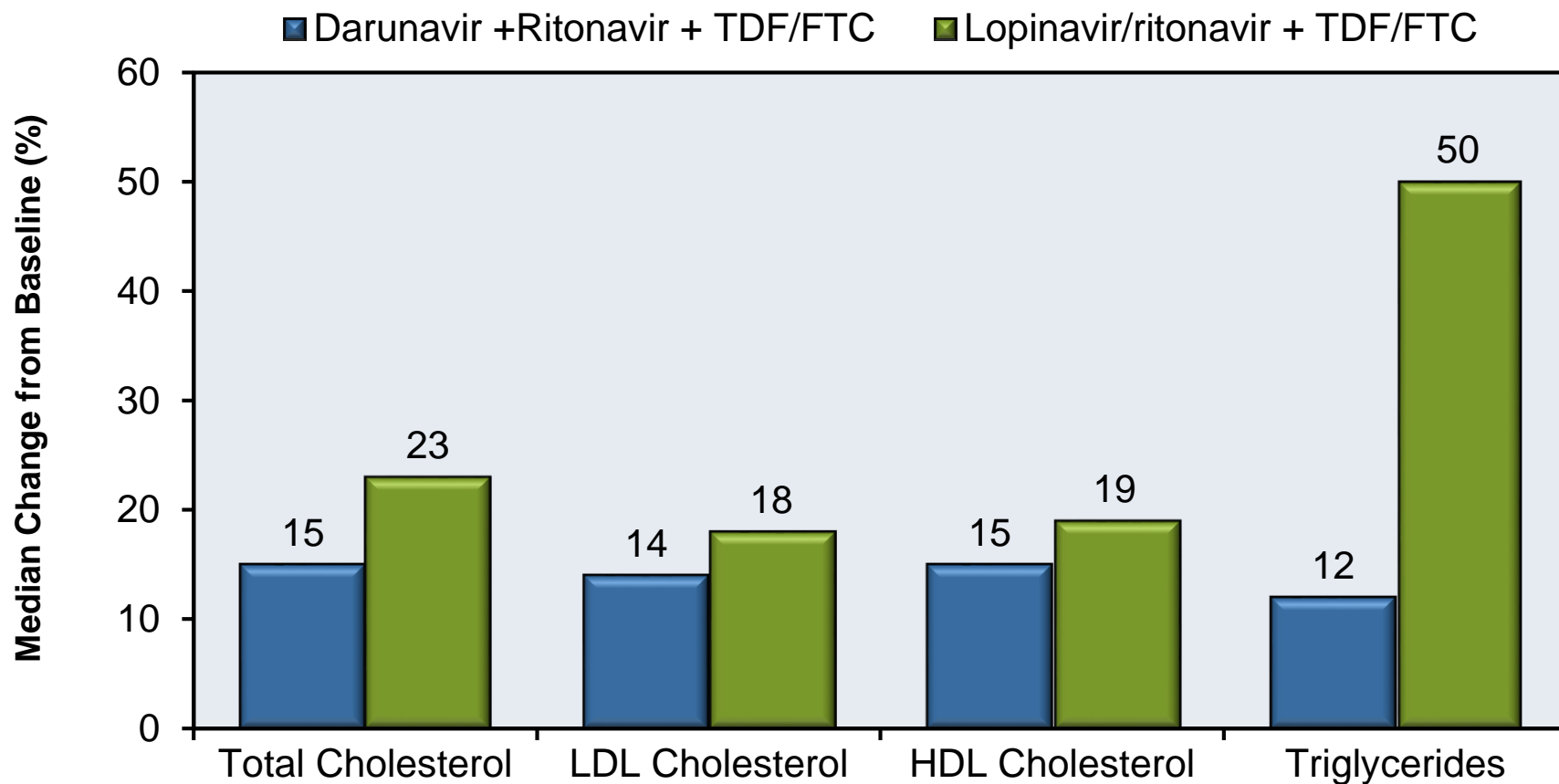
# Once Daily Darunavir/r versus Lopinavir/r in Treatment-Naïve ARTEMIS: Results at 96 Weeks

Week 96: Virologic Response (Intent-to-Treat Analysis)



# Once Daily Darunavir/r versus Lopinavir/r in Treatment-Naïve ARTEMIS: Results at 96 Weeks

Week 96: Analysis of Lipids



Source: Mills AM, et al. AIDS. 2009;23:1679-88.

# Once Daily Darunavir/r versus Lopinavir/r in Treatment-Naïve ARTEMIS: Conclusions (96 Week Data)

**Conclusion:** “At week 96, once-daily DRV/r was both statistically noninferior and superior in virologic response to LPV/r, with a more favorable gastrointestinal and lipid profile, confirming DRV/r as an effective, well tolerated, and durable option for antiretroviral-naïve patients.”

# Acknowledgment

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*The content in this slide set does not represent the official views of the U.S. Department of Health and Human Services, Health Resources & Services Administration.*

