**Etravirine (ETV)**

3rd line drug information for the Clinician

**Class:** Non-nucleoside reverse transcriptase inhibitor (NNRTI)

**Dose:**

1. Adults: 200mg bd p.o. (2x100mg tablets) after food taken whole or dispersed in a glass of water.

2. Children and Adolescents (approved for 6-18 years of age; > 16 kg):

16-20 kg: 100 mg bd

20-25 kg: 125 mg bd

25-30 kg: 150 mg bd

>30 kg: 200 mg bd

**Side effects:**

**Most common adverse effects:** Rash common (9%) in first 2-4 weeks, usually mild. The patient can continue treatment if the rash is not associated with hypersensitivity signs; the rash usually resolves within 1-2 weeks (rash is more common in women than men), nausea, diarrhea, gynaecomastia.

**Most significant adverse effects:**

**-**Severe Skin and Hypersensitivity Reactionsin 1.3%, (potentially life-threatening/ fatal) , Stevens-Johnson syndrome, Toxic epidermal necrolysis**,** Erythema multiforme

**-** Hypersensitivity reactions: rash + constitutional findings (fever, general malaise, fatigue, muscle/joint aches, blisters, oral lesions, conjunctivitis, facial edema, hepatitis, eosinophilia, angioedema) possibly with hepatic failure.

-Rhabdomyolysis

**NB: Discontinue ETV immediately if severe skin reactions occur.**

If you diagnose any other adverse drug reactions, please report to the Pharmacovigilance centre at College of Medicine.

*Other important information:*

*1. Patients with Hepatitis B and/or C infection can be given ETV with monitoring of LFTs (if possible)*

*2. No dosage adjustment is necessary for patients with mild to moderate hepatic impairment but requires monitoring of LFTs*

*3. Etravirine has negligible renal excretion therefore no dosage adjustment is necessary for patients with renal impairment including those on dialysis*

*4. ETV can be given to pregnant women with monitoring of foetal outcomes, report any adverse foetal outcomes to the Pharmacovigilance centre at College of Medicine.*

*5. Breast-feeding women can be given ETV though it is not known if ETV is secreted into breast milk*

**Drug-Drug Interactions:**

ETV is a substrate as well as an inducer and inhibitor of the Cytochrome P450 enzyme system in the liver. Therefore it will interact with many drugs that are metabolized by these enzymes.

Potential Important Drug-Drug Interactions with ETV:

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| Drug name (Drug class) | Effect |
| Rifampicin and rifabutin | ↓ ETV, co-administration may cause significant decreases in ETV plasma concentrations and loss of therapeutic effect of ETV |
| Antifungals e.g. fluconazole, ketoconazole | ↑ ETV, use with caution |
| Antiarrhythmics:  e.g. amiodarone, Lignocaine (lidocaine) | ↓ levels of Antiarrhythmic |
| Clarithromycin | ↑ ETV  ↓ clarithromycin - use azithromycin if treating  *Mycobacterium avium* complex (MAC) |
| Warfarin | ↑ levels, warfarin dose may need to be reduced, monitor the INR closely |
| Anticonvulsants:  carbamazepine  phenobarbitone, Phenytoin | ↓ ETV, should not be co-administered |
| Corticosteroids: dexamethasone | ↓ ETV, use alternative corticosteroid especially with long term use |
| Benzodiazepines: diazepam | ↑ diazepam, Reduce the dose of diazepam |

The following drugs can be co-prescribed with ETV: atorvastatin (though the dose of the statin may need to be increased, pravastatin, sildenafil (Viagra)

If you need to co-prescribe any other drugs with ETV, check for potential for dangerous interactions on the following website: <http://www.hiv-druginteractions.org/> or the British National Formularly or contact the Pharmacovigilance centre at College of Medicine.

Discourage patients from using herbal medicines or drugs bought on the streets and at the market.

WRITTEN INFORMATION TO BE GIVEN TO THE PATIENT

**ETRAVIRINE**

This is a pill used in combination with other pills to suppress HIV. It stops the virus from multiplying by blocking one of its enzymes called reverse transcriptase.

Take 2 tablets twice daily after eating food.

(Do not take this tablet on an empty stomach, it will not be absorbed properly and may result in a reduction in its power to treat HIV). Swallow the tablets whole with a glass of water. Do not chew the tablets. If you are unable to swallow the etravirine tablets whole, place the tablets in a glass containing a teaspoon of water. (If needed, add more water to cover the tablets.) Do not put the tablets in other liquids. Stir well until the water looks milky. At this step, you may add a small amount of water, orange juice, or milk to make the mixture easier to drink. Then drink the mixture right away. Rinse the glass with water, orange juice, or milk several times, and completely swallow the rinse each time to make sure you take the entire dose of etravirine. Store the tablets in their bottle in a cool place.

Some side effects of the etravirine may include nausea, diarrhoea, abdominal pain, vomiting, headache and tingling, numbness, or pain in your hands or feet. Rashes are common in first 2-4 weeks and are usually mild and resolve within 1-2 weeks without stopping treatment.

Report to your clinic right away if you develop a rash along with any of the following symptoms:

Hives or sores in your mouth and around your eyes; blistering or peeling skin; trouble swallowing or breathing; swelling of your face, eyes, lips, tongue, or throat; fever; yellowing of your skin or eyes (jaundice); dark-colored urine; abdominal pain (pain on the right side of your stomach area).

Your medicine may need to be stopped.

Report to your clinic if you experience anything else that you think may be related to your taking this medicine.

Etravirine may affect the way your liver works especially the way it removes from the body poisons and medicines we take. It is very important that you take medicines and vitamins prescribed by the doctors and nurses in your clinic. Do not take herbal medicines or medicines sold on the streets or at the market while you are taking Etravirine.