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Amprenavir

A Viewpoint by Walter T. Hughes

St Jude Children's Research Hospital,
Lauderdale, Memphis, Tennessee

The significant impact of HIV protease inhibitors on the treatment of HIV infection has been well established in extensive clinical trials. Attainment and maintenance of an undetectable viral load is now the standard goal for therapy. This achievement requires combinations of antiretroviral agents, usually including a protease inhibitor. Currently, the predominant problems associated with this approach are:

- failure of some patients to respond
- noncompliance and difficulty in consuming large quantities of drugs
- adverse effects
- emergence of resistant mutants of HIV.

Thus, in the assessment of any new drug, one hopes to find greater efficacy and safety, as well as a more user-friendly preparation.

Amprenavir seems to be a useful addition to currently available antiretroviral drugs. While it may not qualify as a major therapeutic breakthrough, it has attributes that will probably earn it a place among the mainline therapeutic regimens for HIV infection.

As with all other antiretroviral drugs, amprenavir cannot be considered for use as monotherapy. Currently available data suggest that combination therapy comprising nucleoside reverse transcriptase inhibitors and other protease inhibitors is successful in achieving undetectable viral loads in the majority of patients; however, the most appropriate combination has yet to be determined. Key issues are whether or not amprenavir has sufficiently limited cross-resistance to be able to serve as a replacement therapy in patients who have not responded to other protease inhibitors, and whether other protease inhibitors have activity when amprenavir fails.

Because of the importance of full compliance, amprenavir's twice-daily administration schedule constitutes an advantage over other protease inhibitors with more frequent administration schedules. The tolerability profile of amprenavir is also acceptable. Paediatricians will be pleased that a liquid formulation is available and that clinical trials of amprenavir in children have been conducted in parallel to adult studies. Studies now in progress should provide considerable new information on amprenavir within the next year. ▲