

**HIV 101 RESULTS AT 96 WEEKS OF A5142 - A RANDOMIZED STUDY OF INITIAL HIV THERAPY WITH EFAVIRENZ OR LOPINAVIR/RITONAVIR ALONG WITH TWO NRTIS OR THE COMBINATION OF THE TWO ALONE.**

	LPV/r (n=253)	EFV (n=250)	LPV/r+EFV (n=250)	P Value LPV/r vs. EFV
% <50 HIV copies/mL (ITT)	77 %	89 %	83 %	0.003
% <200 HIV copies/mL (ITT)	86 %	93 %	92 %	0.041
% Without virologic failure*	67 %	76 %	73 %	0.006
% Without regimen completion due to virologic failure or toxicity**	54 %	60 %	61 %	0.02
CD4+ cell count change from baseline (/mm <sup>3</sup> )	+285	+241	+268 %	0.01
<b>Genotypic resistance mutations detected [# subjects (% genotypes in that arm)]:</b>				Not Reported
<b>NRTI</b>	8 (15%)	11 (33%)	4 (10%)	
<b>M184V</b>	7	8	1	
<b>K65R</b>	0	3	0	
<b>NNRTI</b>	2 (4%)	16 (48%)	27 (69%)	
<b>K103N</b>	0	9	21	
<b>Major PI (IAS guidelines)</b>	0	0	2	
% Fasting triglycerides >750 mg/dL	6%	3 %	14 %	Not Reported

Modified from: Riddler S, et al. IAC 2006. Abstract THLB0204

LPV/r = Lopinavir/ritonavir, EFV = Efavirenz, ITT = intent-to-treat analysis with missing considered a failure, NRTI = nucleoside reverse transcriptase inhibitor, NNRTI = non-nucleoside reverse transcriptase inhibitor, PI = protease inhibitor. IAS = International AIDS Society

\*Virologic failure defined as a) lack of 1 log<sub>10</sub> drop in viral load or rebound before week 32 or b) failure to suppress to <200 copies/mL or rebound after week 32. Threshold for statistical significance p <0.016.

\*\*Regimen completion defined as virologic failure or toxicity related discontinuation of any regimen component. Threshold for statistical significance p <0.016.