

**Pitavastatin 4 mg vs. Pravastatin
40 mg in HIV Dyslipidemia: *Post-
Hoc* Analysis of the INTREPID
Trial Based on the Independent
CHD Risk Factor for Age**

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Disclosures

- ❖ Craig A. Sponseller, MD – employee of Kowa Pharmaceuticals America, Inc.
- ❖ Masaya Tanahashi - employee of Kowa Company, LTD, Japan
- ❖ Hideki Suganami - employee of Kowa Company, LTD, Japan
- ❖ Vladimir A. Kryzhanovski, MD, PhD – employee of Eli Lilly and Company
- ❖ Judith A. Aberg, MD (New York University School of Medicine) – INTREPID study design consultant and study investigator

Introduction

- ❖ Dyslipidemia, an established cardiovascular (CV) disease risk factor, is seen in 81% of men (median age 47 yrs) and 67% of women (median age 45 yrs) with HIV infection in the US. (Buchacz 2013)
- ❖ Advances in antiretroviral therapy (ART) continue to extend the lifespans HIV-infected individuals. By 2015, an estimated 50% of people with HIV in the US will be >50 years of age. (www.aoa.gov)
- ❖ CHD in aging HIV-infected population is an increasing medical challenge. Based on 10-year CHD risk, increase in cardiac events is expected in aging HIV-infected subjects in the next decades (≥ 45 years/ < 45 years 16.4% vs. 4.2 %, $p < 0.001$). (Esser 2013)
- ❖ There is an estimated 50-75% increased relative risk for acute myocardial infarction (MI) in HIV-infected individuals. (Freiberg 2013, Triant 2007)

NCEP ATP III Major Independent Risk Factors for CHD

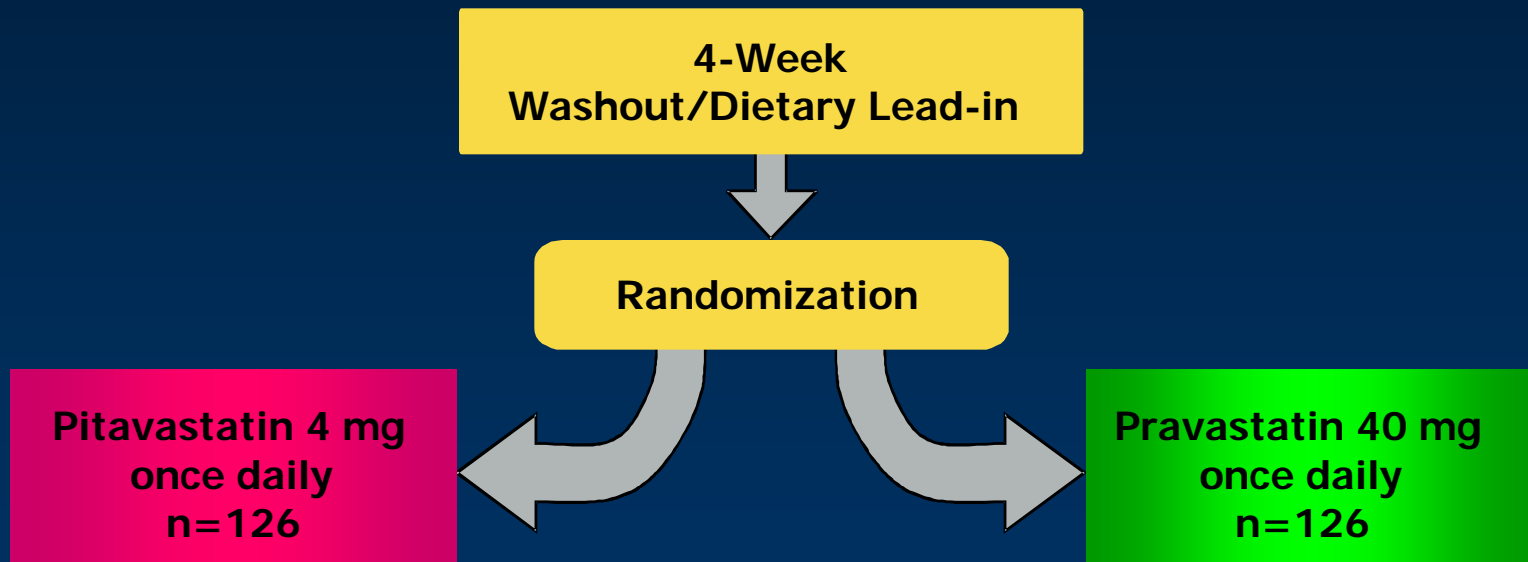
- ❖ Cigarette smoking
- ❖ Hypertension (BP \geq 140/90 mmHg or on antihypertensive medication)
- ❖ Low HDL-C ($<$ 40 mg/dL) (*HDL cholesterol \geq 60 mg/dL = "negative" risk factor; its presence allows for subtraction of one risk factor from the count.*)
- ❖ Family history of premature CHD (CHD in male first degree relative $<$ 55 years; CHD in female first degree relative $<$ 65 years)
- ❖ Age: men \geq 45 yrs; women \geq 55 yrs

Age and Risk

- ❖ Age: a major independent risk factor for CHD; non-modifiable (men ≥ 45 yrs; women ≥ 55 yrs)
- ❖ Risk of acute MI increases significantly with age
- ❖ HIV population vs. non-HIV population
 - ◆ Rates of acute MI per 1000 person-yrs (95% CI): (Freiberg 2013)
 - 40 - 49 yrs: 2.0 (1.6-2.4) vs. 1.5 (1.3-1.7); $P < 0.05$
 - 50 - 59 yrs: 3.9 (3.3-4.5) vs. 2.2 (1.9-2.5); $P < 0.05$
 - 60 - 69 yrs: 5.0 (3.8-6.7) vs. 3.3 (2.6-4.2); $P < 0.05$

Study Design

INTREPID = HIV-Infected Patients and Treatment with Pitavastatin vs. Pravastatin for Dyslipidemia



Phase 4, double-blind, double-dummy, 12-week superiority study
(followed by a 40-week, double-blind, safety extension study)

Randomization 1:1, stratified by presence/absence of viral hepatitis B/C

Eligibility Criteria

- ❖ Subjects: HIV-infected adults (18-70 yrs) with dyslipidemia
 - ◆ Stable ART x ≥ 6 months
 - ◆ HIV-1 RNA viral load < 200 copies/mL and CD4 count > 200 cells/ μ L for ≥ 3 months
 - ◆ Fasting serum LDL-C 130 - 220 mg/dL and triglycerides ≤ 400 mg/dL after 4-wk washout/dietary stabilization period

Endpoints

- ❖ Primary endpoint: Superiority based on mean % change in fasting serum LDL-C from Baseline to Week 12
- ❖ Secondary endpoints: Changes in other lipid parameters (fasting serum Apo B, non-HDL-C, HDL-C, triglycerides)
- ❖ *Post-hoc Analysis* - Age-based evaluation of primary and secondary endpoints
- ❖ Efficacy analyses included only patients who received at least 1 dose of study drug and had a least 1 on-treatment lipid assessment.

Baseline Characteristics^{*}

	Pitavastatin 4 mg n=126	Pravastatin 40 mg n=126
Age, mean (SD), yrs	50.1 (7.5)	49.2 (8.7)
Males, n (%)	106 (84.1)	111 (88.1)
Race, n (%)		
Caucasian	107 (84.9)	96 (76.2)
African-American	16 (12.7)	23 (18.3)
Other	3 (2.4)	7 (5.6)
Body Mass Index, mean (SD), kg/m ²	27.2 (4.5)	28.2 (4.9)

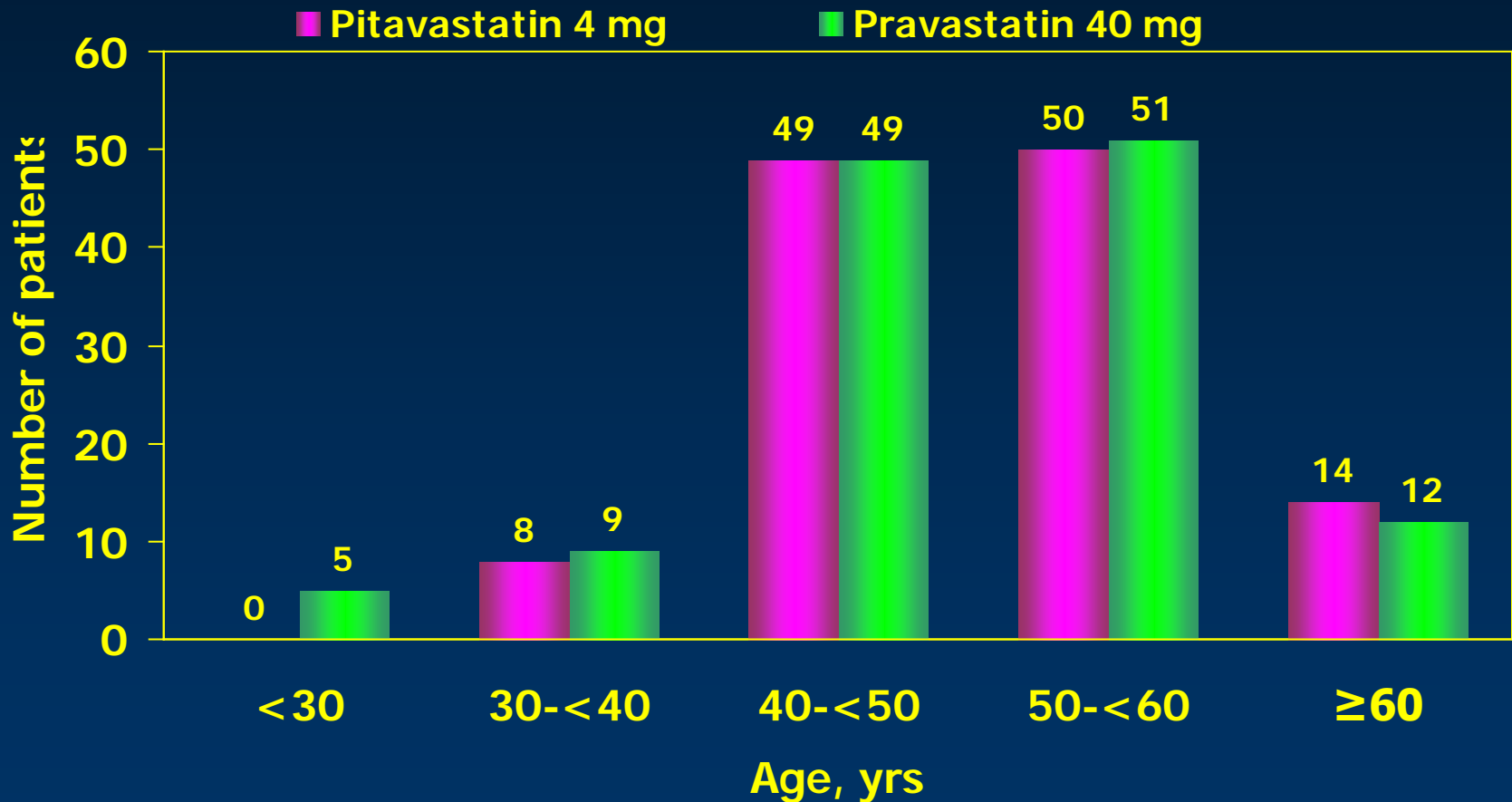
* Safety population

Baseline Characteristics^{*}

	Pitavastatin 4 mg n=126	Pravastatin 40 mg n=126
10-year CHD Risk, n (%)		
>20%	1 (0.8)	1 (0.8)
10-20%	32 (25.4)	30 (23.8)
<10%	93 (73.8)	95 (75.4)
HIV-1 RNA viral load, mean (SD), log copies	1.2 (0.3)	1.1 (0.2)
CD4 cell count, mean (SD), cells/mm ³	648.5 (246.8)	563.7 (211.3)

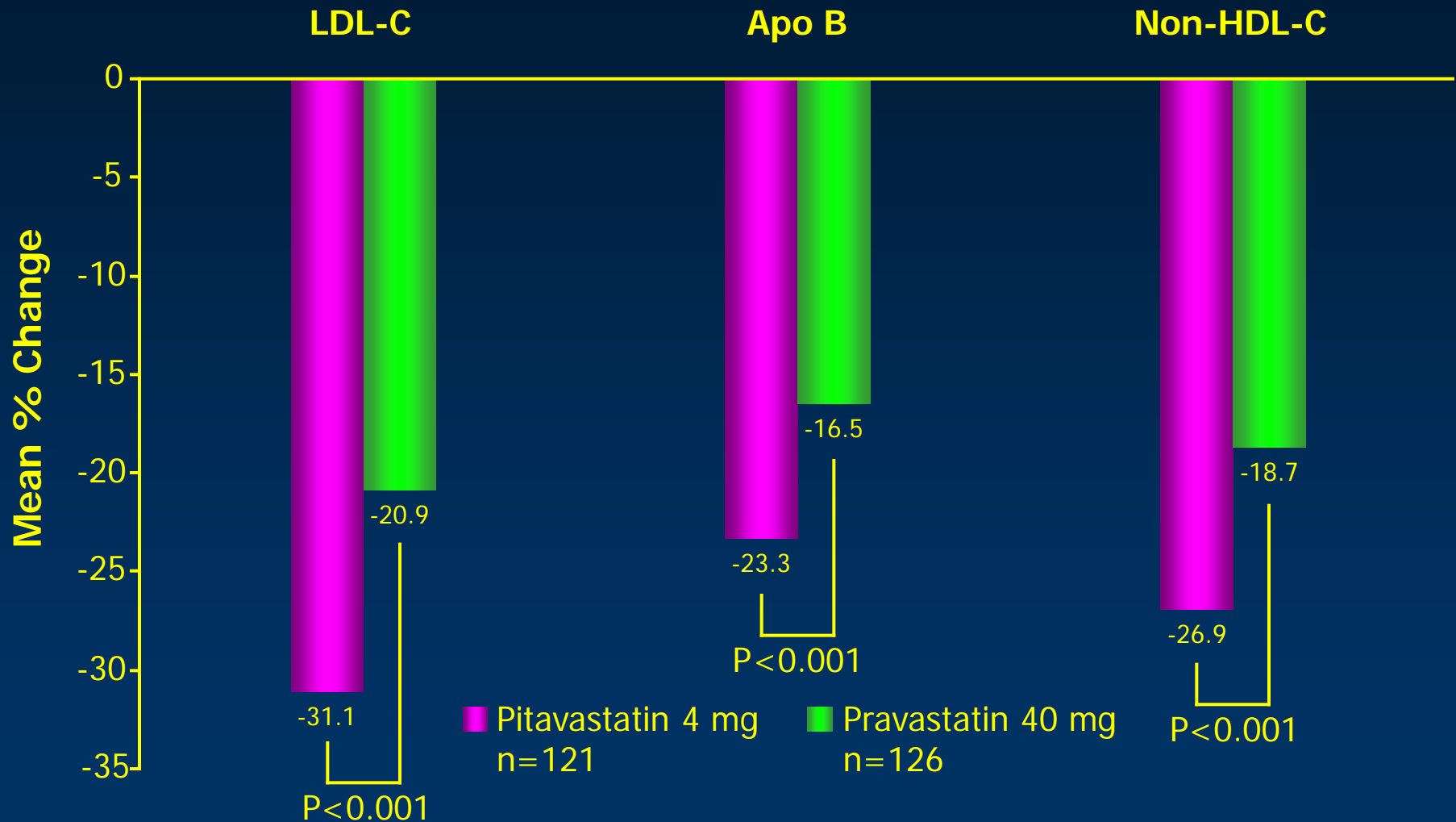
* Safety population

Patient Demographics: Age



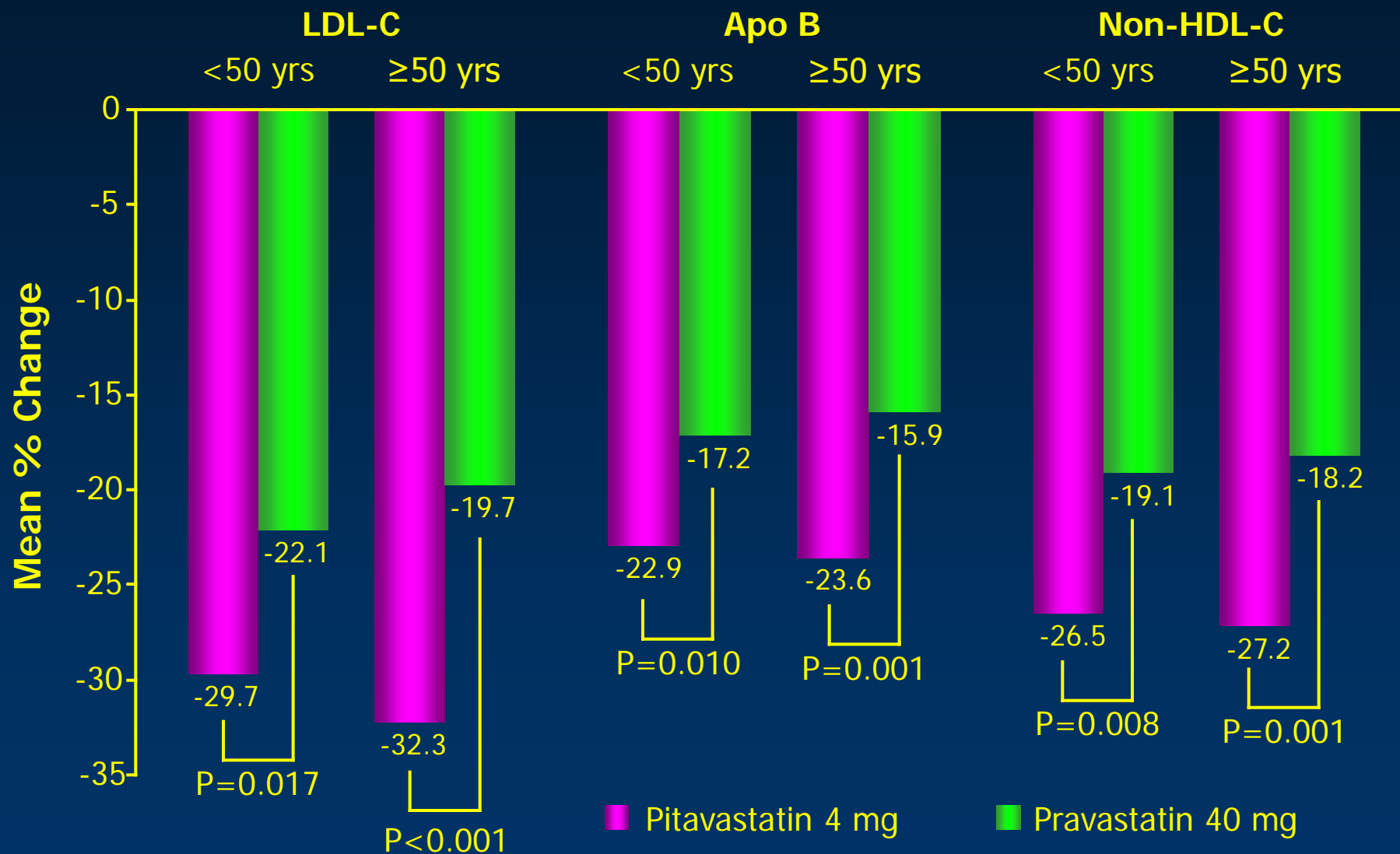
Approximately 50% of the INTREPID population was ≥ 50 yrs

Mean % Change Baseline to Week 12: Primary Study Population



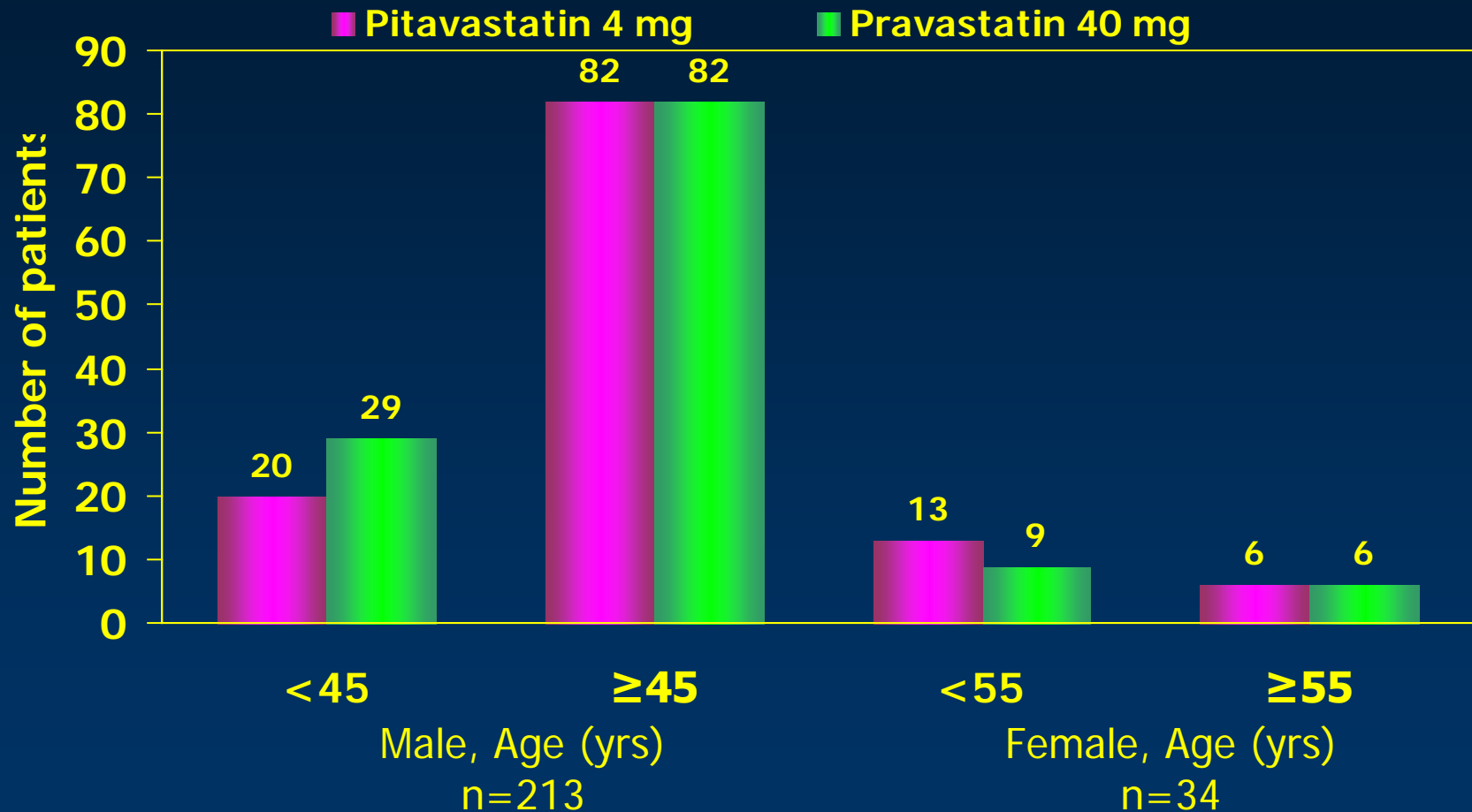
P-values for between-treatment comparisons based on LS mean % change.

Mean % Change Baseline to Week 12



P-values for between-treatment comparisons based on LS mean % change.

Patient Demographics: Sex and Age



71% of the population had age as a major independent risk factor for CHD

Mean Baseline Lipid Measurements

	Pitavastatin 4 mg N=121		Pravastatin 40 mg N=126	
<u>LDL-C, mg/dL</u>	<u>n</u>		<u>n</u>	
Male <45 yrs	20	154.4	29	158.0
Male ≥45 yrs	82	153.2	82	154.1
Female <55 yrs	13	164.2	9	150.1
Female ≥55 yrs	6	163.7	6	151.2

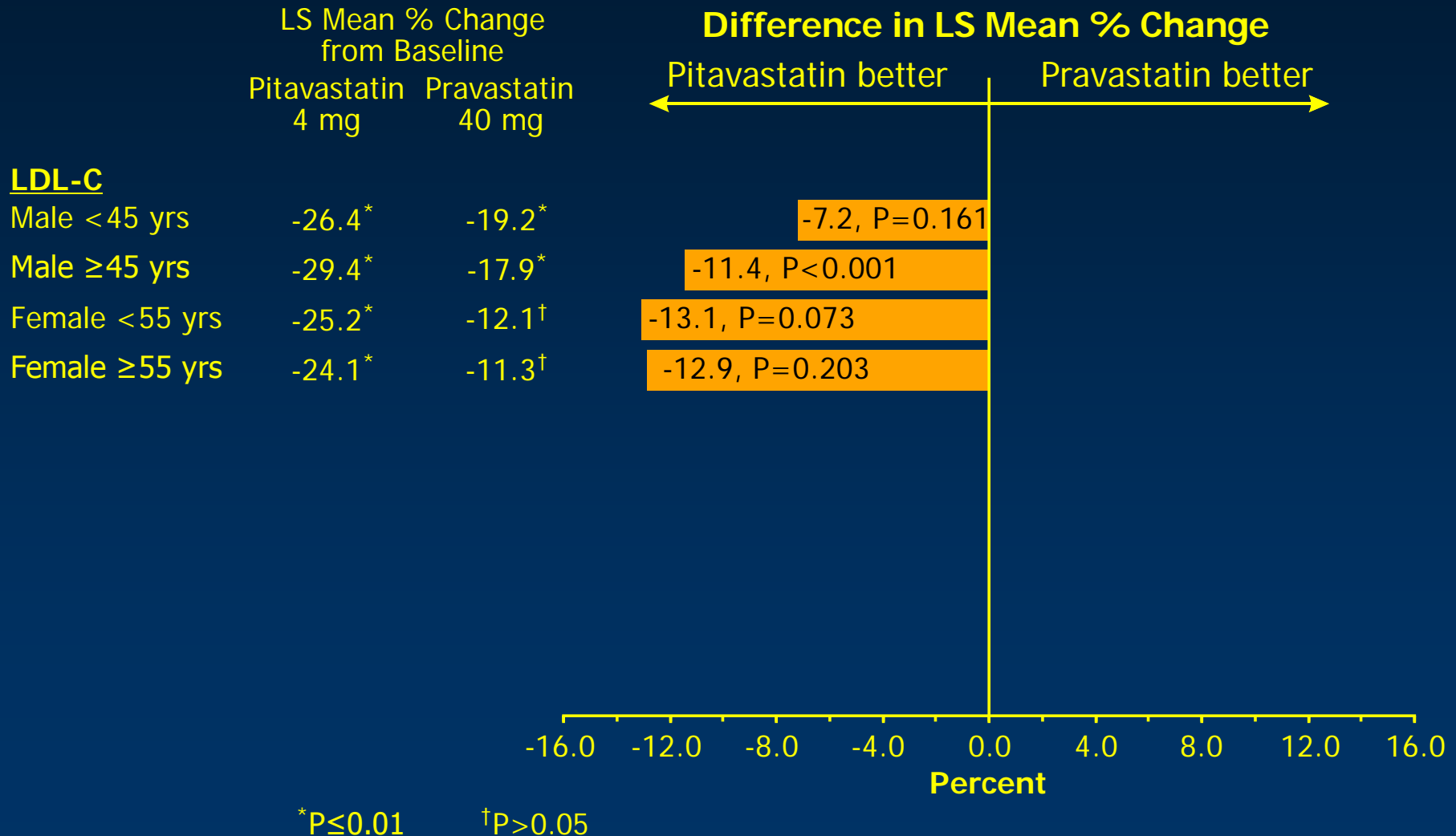
Mean Baseline Lipid Measurements

	Pitavastatin 4 mg	Pravastatin 40 mg
<u>Apo B, mg/dL</u>		
Male <45 yrs	124.8	129.7
Male ≥45 yrs	122.5	126.7
Female <55 yrs	125.8	132.2
Female ≥55 yrs	136.2	122.5
<u>Non-HDL-C, mg/dL</u>		
Male <45 yrs	187.4	196.1
Male ≥45 yrs	186.9	187.3
Female <55 yrs	197.8	187.0
Female ≥55 yrs	199.7	181.0

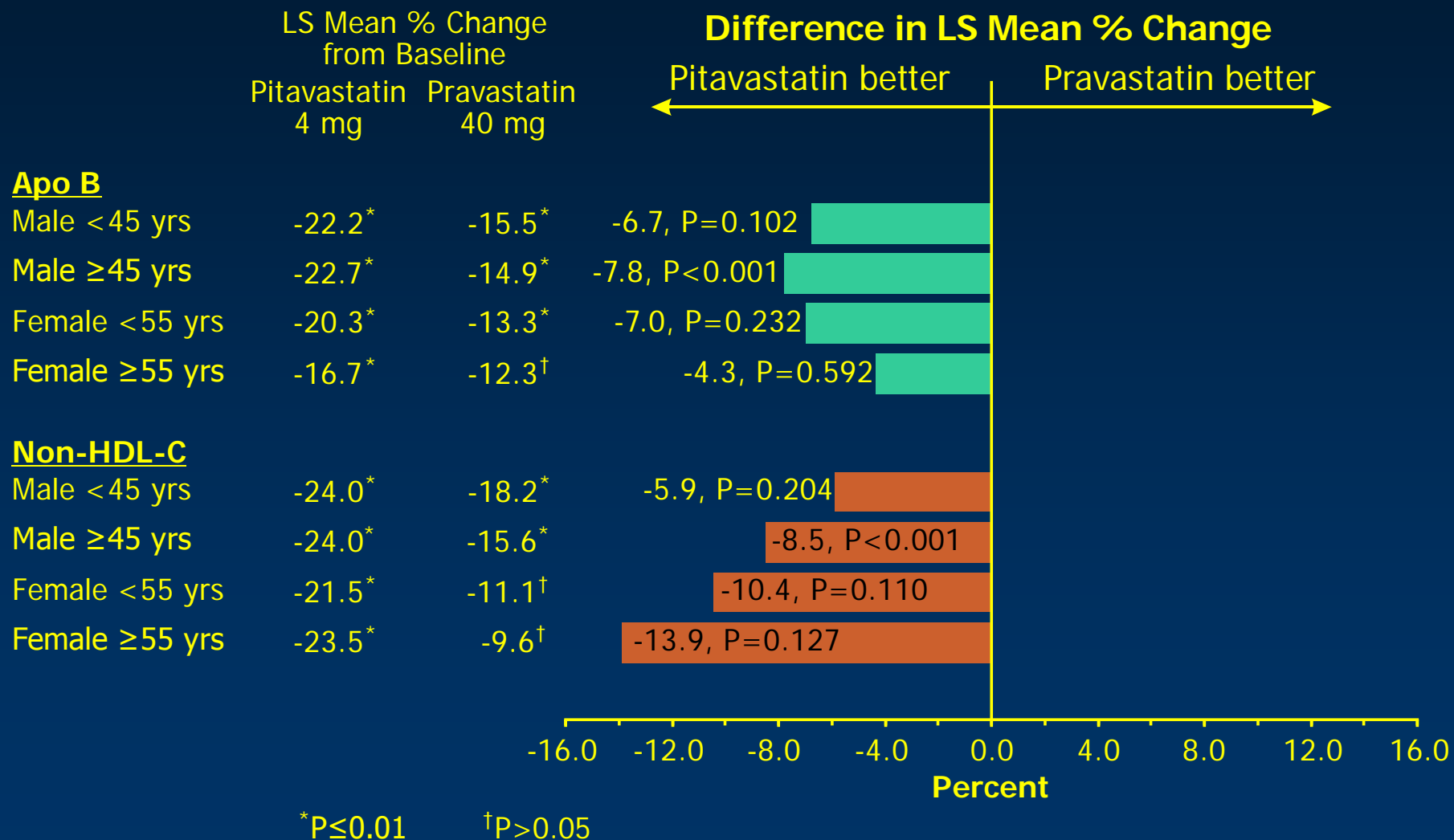
Mean Baseline Lipid Measurements

	Pitavastatin 4 mg	Pravastatin 40 mg
<u>HDL-C, mg/dL</u>		
Male <45 yrs	52.4	47.2
Male ≥45 yrs	46.9	48.7
Female <55 yrs	58.9	53.8
Female ≥55 yrs	57.0	57.3
<u>Triglycerides, mg/dL</u>		
Male <45 yrs	169.2	187.4
Male ≥45 yrs	173.8	165.8
Female <55 yrs	182.2	199.6
Female ≥55 yrs	179.7	148.8

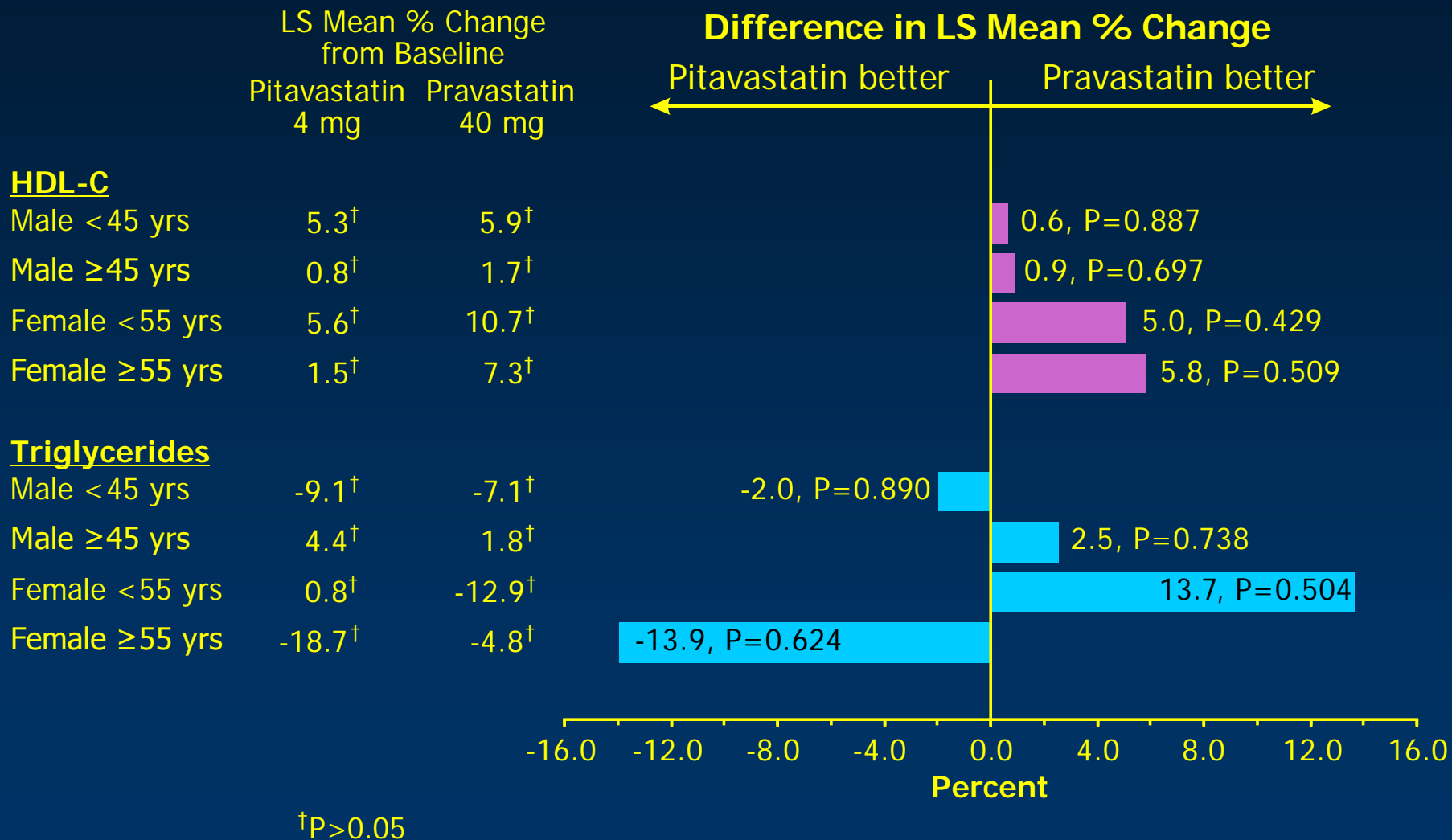
LDL-C: Change from Baseline to Week 12



Apo B and Non-HDL-C: Change from Baseline to Week 12



HDL-C and Triglycerides: Change from Baseline to Week 12



HIV-1 RNA Viral Load and CD4 Cell Count: Change from Baseline to Week 12

Parameter	Pitavastatin 4 mg		Pravastatin 40 mg		P-Value
	n	Mean Δ from Baseline (SD)	n	Mean Δ from Baseline (SD)	
HIV-1 RNA viral load, log copies	107	-0.02 (0.3)	112	0.08 (0.4)	0.06
CD4 count, cells/mm ³	110	-8.9 (154.9)	110	13.6 (120.6)	0.29

P-values from ANCOVA model of mean % change from baseline.

Safety Outcomes*

	Pitavastatin 4 mg N=126	Pravastatin 40 mg N=126
	n (%)	
Treatment Emergent Adverse Event (TEAE)		
Any TEAE	77 (61.1)	79 (62.7)
Any drug-related TEAE	14 (11.1)	12 (9.5)
Musculoskeletal and Connective Tissue Disorders		
Arthralgia	3 (2.4)	4 (3.2)
Myalgia	1 (0.8)	3 (2.4)
Back pain	1 (0.8)	2 (1.6)
Pain in extremity	2 (1.6)	3 (2.4)

* Safety population

Safety Outcomes*

	Pitavastatin 4 mg N=126	Pravastatin 40 mg N=126
	n (%)	
Laboratory Enzymes		
ALT >2 x ULN	4 (3.2)	3 (2.4)
AST >2 x ULN	0 (0.0)	0 (0.0)
CK >5 x ULN	2 (1.6)	0 (0.0)
Virologic Status		
Virologic failure	3 (2.4)	4 (3.2)

* Safety population

Virologic failure: defined as HIV-1 RNA viral load >200 copies/mL and a >0.3 log increase from baseline.

Summary

- ❖ INTREPID population: 86% male; 71% had age as a major independent risk factor for CHD.
- ❖ In the male subgroups, age ≥ 45 , < 45 :
 - ◆ Atherogenic lipid factors (LDL-C, Apo B, and non-HDL-C) were significantly reduced for both pitavastatin 4 mg and pravastatin 40 mg.
 - ◆ Pitavastatin 4 mg reduced these parameters significantly more than pravastatin 40 mg in males ≥ 45 yrs, an independent risk factor for CHD.
- ❖ In the female subgroups:
 - ◆ Pitavastatin 4 mg showed statistically significant reductions in atherogenic lipids/lipoproteins LDL-C, Apo B, and non-HDL-C in females < 55 and ≥ 55 yrs.
 - ◆ Pravastatin 40 mg showed a statistically significant reductions only in Apo B in females < 55 yrs.
 - ◆ No between-treatment differences in lipid parameters, likely due to small samples sizes.
- ❖ There were no between-treatment differences in HDL-C or triglycerides in either the male or female subgroups.

Conclusions

- ❖ Pitavastatin 4 mg demonstrated a superior reduction in LDL-C compared with pravastatin 40 mg in HIV-infected adults with dyslipidemia in the overall study population.
- ❖ Pitavastatin 4 mg significantly reduced atherogenic lipid parameters (LDL-C, Apo B, and non-HDL-C) in men age ≥ 45 yrs and women age ≥ 55 yrs.
- ❖ Pitavastatin 4 mg demonstrated significantly greater reductions in LDL-C, Apo B, and non-HDL-C vs. pravastatin 40 mg in men with the major independent risk factor for age ≥ 45 yrs.
- ❖ The overall adverse event profiles appeared similar between treatment arms.