

⚠ HIGH ALERT**abacavir (Rx)**

(ah-bak'ah-veer)

Ziagen*Func. class.:* Antiretroviral*Chem. class.:* Nucleoside reverse transcriptase inhibitor (NRTI)

ACTION: Inhibitory action against HIV-1; inhibits replication of the virus by incorporating into cellular DNA by viral reverse transcriptase, thereby terminating the cellular DNA chain

USES: In combination with other antiretroviral agents for HIV-1 infection

Unlabeled uses: HIV prophylaxis following occupational exposure

CONTRAINDICATIONS

Black Box Warning: Hypersensitivity, moderate/severe hepatic disease, lactic acidosis

Precautions: Pregnancy, breastfeeding, children <3 mo, granulocyte count <1000/mm³ or Hgb <9.5 g/dL, severe renal disease, impaired hepatic function, HLA B5701+ (black, Caucasian, Asian patients), abrupt discontinuation; Guillain-Barré syndrome, immune reconstitution syndrome, MI, obesity, polymyositis

DOSAGE AND ROUTES

• **Adult and adolescent ≥16 yr:** PO 300 mg bid or 600 mg/day with other antiretrovirals

• **Adolescent <16 yr and child ≥3 mo:** PO (oral solution) 8 mg/kg bid or 16 mg/kg daily, max 300 mg bid with other antiretrovirals; tablets 14-19 kg 150 mg bid or 300 mg daily; 20-24 kg 150 mg AM and 300 mg PM or 450 mg daily; ≥25 kg 300 mg bid or 600 mg daily

Hepatic dose

• **Adult: PO (Child-Pugh A [5-6 points]) (oral sol) 200 mg bid; moderate to severe hepatic disease, do not use**

HIV prophylaxis (unlabeled)

• **Adult: PO** 600 mg daily as an alternative

Available forms: Tabs 300 mg; oral sol 20 mg/mL

Administer:

- Give in combination with other antiretrovirals
- May give without regard to food q12hr around the clock
- Reduce dose in hepatic disease, use oral sol
- Storage in cool environment; protect from light; oral sol stored at room temperature; do not freeze

SIDE EFFECTS

CNS: *Fever, headache, malaise, insomnia*

GI: *Nausea, vomiting, diarrhea, anorexia, ALT, hepatotoxicity, hepatomegaly with steatosis*

INTEG: *Rash, urticaria, hypersensitivity reactions*

META: *Lactic acidosis*

OTHER: *Fatal hypersensitivity reactions, MI, fat redistribution, immune reconstitution*

PHARMACOKINETICS

Rapid/extensive absorption, distributed to extravascular space, then erythrocytes; 50% protein binding; extensively metabolized to inactive metabolites by the liver; half-life 1½ hr; excreted in urine, feces (unchanged); onset, peak, duration unknown

INTERACTIONS

• **Do not coadminister with abacavir-containing products, ribavirin, interferon**

• **Increase:** possible lactic acidosis—**ribavirin**

Increase: abacavir levels—alcohol

Decrease: abacavir levels—tipranavir

Decrease: levels of—methadone, may require higher dose of methadone

Drug/Lab Test

Increase: serum glucose, triglycerides, ALT, AST, amylase, CK