# A Single Once Daily ABC/DTG/3TC Tablet Predicts Safe and Effective Exposures in Children 3 to <6kg

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### Introduction

- Abacavir (ABC)/dolutegravir (DTG)/lamivudine (3TC) is a fixed-dose combination (FDC) tablet approved for adults and children with HIV weighing  $\geq 6$  kg and aged  $\geq 3$  months in the US.
- We evaluated whether a single FDC ABC/DTG/3TC (60 mg/5 mg/30 mg) dispersible tablet (DT) once daily would achieve the rapeutic targets in children weighing  $\geq 3$ to <6 kg (aged ≥4 weeks) using population pharmacokinetic (PopPK) model approach.

### Methods

- Drug-specific pediatric PopPK models were used for simulations<sup>1-2</sup>.
- ABC model adjusted with uridine diphosphateglucuronosyltransferase 2B7 (UGT2B7) and alcohol dehydrogenase (ADH) enzyme maturation<sup>3</sup>.
- DTG model with UGT1A1 maturation described previously<sup>1</sup>.
- $\checkmark$  3TC model adjusted with renal maturation<sup>4</sup>.

Simulations were performed with 1000 replicate trials of 200 participants. Exposure metrics (AUC0-24h, Cmax and C24h) were calculated for each drug and compared with geometric mean (GM) exposure target range previously used in pediatrics<sup>5</sup>.

- Safety data from young children across weight bands from IMPAACT 2019 (≥6 kg)<sup>5</sup>, P1093 (≥3 kg)<sup>6</sup> and ODYSSEY ( $\geq 3 \text{ kg}$ )<sup>7</sup> were evaluated.
- Review of ABC and 3TC PK studies in neonates (including PETITE Study)<sup>8-9</sup> and infants <3 months were used to interpolate safety conclusions to infants 4 weeks to <3 months of age.

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### The Once Daily Single ABC/DTG/3TC DT (60 mg/5 mg/30 mg) Treatment Option May Be a Practical Solution for Infants Weighing ≥3 to <6 kg (Aged ≥4 Weeks) With Early HIV Diagnosis

### Results

 Predicted exposures (Table 1) were within the target range (DTG C24h GM 0.697-2.26 µg/mL, ABC AUC0-24h GM 6.3-50.4 µg\*h/mL, and 3TC AUC0-24h GM 6.3-26.5 µg\*h/mL)<sup>5</sup>.

#### Table 1. Predicted ABC/DTG/3TC DT Exposures in ≥3 to <6 kg

Entity	Dispersible Tablet Dose	AUC0-24h (µg*h/mL)	C24h (µg/mL)	Cmax (µg/mL)
ABC	60 mg	<b>17.84</b> (16.54, 19.24)	0.11 (0.09, 0.13)	4.73 (4.44, 5.03)
DTG	5 mg	57.79 (54.07, 61.56)	<b>1.32</b> (1.18, 1.46)	4.59 (4.36, 4.83)
3TC	30 mg	<b>11.36</b> (10.77, 11.97)	0.03 (0.02, 0.04)	1.80 (1.72, 1.89)

Note: AUC0-24h, Cmax and C24h presented as a GM (95% CI)





## Figure 2. Comparison of Predicted DTG C24h in ≥3 to <6 kg With Approved FDC Doses in ≥6 kg $10.00^{-1}$ 1.00-0.10 0.01 Weight Bands

(hg/mL)
C24
DTG

)*h/mL)
:4 (µç
C0-2
CAU
3T(

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#### Figure 3. Comparison of Predicted 3TC AUC0-24h in ≥3 to <6 kg With Approved FDC Doses in ≥6 kg



#### The predicted exposures of ABC/DTG/3TC in ≥3 to <6 kg</li> with FDC tablet were comparable to other weight bands with approved FDC doses<sup>5</sup> (Figures 1 to 3).

### Safety

- pediatric population.
- band (≥4 weeks).

### Conclusions





• Use of 5 mg DTG as Dispersible Tablets in the  $\geq$ 3 to <6 kg weight band in the P1093 and ODYSSEY studies led to approval of DTG based regimens from  $\geq$ 4 weeks.

Consideration of the benefit risk balance of ABC/DTG/3TC use in the  $\geq 3$  to <6 kg weight band was also supported by the existing safety data from subjects  $\geq 6$  kg taking ABC/DTG/3TC in IMPAACT 2019 study. These data did not reveal additional safety concerns with ABC/DTG/3TC compared to either what has been previously observed in adults or observed for the individual single entities in a

 Available literature references presenting safety data in neonates and infants <3 months, taken together with the DTG safety data in infants from 4 weeks of age from P1093, showed that the safety profile across weight bands treated with these DTG based regimens is similar.

 These safety data suggest no additional drug related safety issues in this age group compared to infants 6 kg and above (or 3 months and above), in addition to supporting the extension of the indication to the  $\geq 3$  to < 6 kg weight

 Predicted exposures with single FDC ABC/DTG/3TC DT in infants weighing  $\geq 3$  to <6 kg (aged  $\geq 4$  weeks) were above the targets and expected to provide comparable efficacy observed in pediatrics and adults<sup>5</sup>.

• The available safety data suggest a positive benefit-risk balance for use of single FDC ABC/DTG/3TC DT in the  $\geq$ 3 to <6 kg weight band, and from 4 weeks of age.