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Maraviroc is a CCR5 co-receptor antagonist

**aivaroc**<sup>®</sup>  
(maraviroc)  
150 and 300 mg film-coated tablets

NEW

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**AIVAROC<sup>®</sup> (maraviroc) has activity against CCR5-tropic positive HIV-1. It does not have activity against CXCR4-tropic HIV-1, dual-tropic HIV-1, or HIV-2.**

#### Mechanism of Resistance

AIVAROC<sup>®</sup> (maraviroc) does not have activity against CXCR4-tropic HIV-1, dual-tropic HIV-1, or HIV-2. Amongst known CCR5-tropic HIV-1, amino acid residue substitutions in the V3-loop of the HIV-1 envelope glycoprotein (gp160) are necessary for the maraviroc-resistant phenotype. These primary substitutions were isolated at A19T and I26V.

There is no cross resistance to currently available antiretrovirals.

AIVAROC<sup>®</sup> (maraviroc) is generally well tolerated with the incidence of diarrhea, nausea, headache, and fatigue similar to or less than those of placebo. The most common adverse reactions in clinical studies are upper respiratory tract infection, cough, pyrexia, rash and dizziness.

#### Dosage

The usual adult dose is based on concomitant medications and is indicated only for treatment experienced patients.

- With potent CYP3A4 inhibitors: 150mg twice daily
- With weak or non-CYP3A4 inhibitors: 300mg twice daily
- With CYP3A4 inducers: 600mg twice daily

AIVAROC<sup>®</sup> (maraviroc) should not be given to any patient less than 16 years of age.

No dosage adjustment is necessary in renal or hepatic failure at this time.

**Food and Drug Administration (FDA) approved .Prescription Only (POM)**

A Taj Pharma"India Product