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## Update on Atraviroc: An HIV Entry Inhibitor Targeting CCR5

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Atraviroc (873140) is a novel spirodiketopiperazine CCR5 antagonist that binds specifically to human CCR5 and allosterically inhibits HIV entry. Atraviroc has exhibited potent *in vivo* antiviral activity (1.66 log decrease in viral load at nadir) following 10 days of monotherapy. *In vitro* studies of antiviral activity demonstrate that atraviroc is active against HIV isolates from a variety of clades as well as those resistant to current HIV therapies targeting RT, PR, and gp41. *In vitro* studies suggest prolonged CCR5 receptor occupancy (RO) by atraviroc with an offset half-life of >100 hours. *In vivo* studies following short term atraviroc administration using CCR5-specific mAb demonstrate substantial and prolonged CCR5 RO (>50%) by atraviroc, when plasma drug levels were undetectable, observed for approximately 5 days.

In the 10 day monotherapy study of atraviroc in HIV+ subjects, one subject whose virus was R5-tropic at baseline and day 5 showed that R5X4-tropic (dual/mixed) virus was present at Day 10. Subsequent analysis revealed reversion to an R5-tropic only phenotype by day 24, with no decrease in sensitivity to atraviroc (Fold IC<sub>50</sub>). The change in tropism at the population level observed on day 10 was the result of the emergence of pre-existing dual-tropic virus(-es) that were below the limits of detection on day 1. Viruses present in a subject's quasispecies that are below the limits of detection with currently available tropism assays may become detectable following monotherapy with a CCR5 antagonist; however, whether similar changes may occur on combination therapy with a CCR5 antagonist remains to be determined.

Atraviroc has demonstrated potent anti-HIV activity *in vitro* and *in vivo*. Furthermore, atraviroc exhibits a unique allosteric interaction with CCR5 and demonstrates prolonged receptor occupancy. CCR5 antagonists

show promise for inhibiting entry of CCR5-using viruses in the clinical setting.