

Prior Authorization DRUG Guideline

**COMPLERA: (Emtricitabine, rilpivirine and tenofovir)**

Effective Date: 1/28/14

Date Developed: 1/28/14 by Catherine Sanders, MD

Last Approval Date: 1/26/16, 1/24/17, 1/23/18, 1/22/19, 2/18/20

Complera is an Antiretroviral Agent, Reverse Transcriptase Inhibitor (Non-nucleoside); Antiretroviral Agent, Reverse Transcriptase Inhibitor (Nucleoside); Antiretroviral Agent, Reverse Transcriptase Inhibitor (Nucleotide) used in the treatment of HIV-1 infections. Rilpivirine binds to reverse transcriptase and does not require intracellular phosphorylation for antiviral activity; emtricitabine is a cytosine analogue while tenofovir disoproxil fumarate (TDF) is an analog of adenosine 5'-monophosphate. Each drug interferes with HIV viral RNA dependent DNA polymerase activities resulting in inhibition of viral replication.

**Pre-Authorization Criteria:** For use as a complete regimen for the treatment of HIV-1 infection in antiretroviral treatment-naive adult patients with HIV-1 RNA  $\leq 100,000$  copies/mL at the start of therapy, and in certain virologically suppressed (HIV-1 RNA  $< 50$  copies/mL) adult patients on a stable antiretroviral regimen at start of therapy in order to replace their current antiretroviral treatment regimen.

**Note:**

VCHCP requires that Complera be prescribed by an Immunology Clinic physician with current American Academy of HIV medicine (AAHIVM) certification or a physician boarded in Infectious Disease.

**Dosing: Adult:**

HIV: Oral: One tablet once daily (200mg/25mg/300mg tablets)

**Dosing: Pediatric:**

Currently unavailable or not applicable

**Dosing: Geriatric:**

Refer to adult dosing.

**Dosing: Renal Impairment:**

$Cl_{cr} \geq 50$  mL/minute: No dosage adjustments necessary.

$Cl_{cr} < 50$  mL/minute: Use is not recommended.

ESRD requiring dialysis: Use is not recommended.



**Dosing: Hepatic Impairment:**

Mild-to-moderate impairment (Child-Pugh class A or B): No dosage adjustments necessary.

Severe impairment (Child-Pugh class C): No dosage adjustment provided in manufacturer's labeling (has not been studied).

**Dosage Forms: U.S.:**

Excipient information presented when available (limited, particularly for generics); consult specific product labeling.

Tablet, oral:

Complera: Emtricitabine 200 mg, rilpivirine 25 mg, and tenofovir disoproxil fumarate 300 mg

Generic Equivalent Available: U.S.-No

**Administration:**

Administer with food

**Adverse Reactions:**

>10%-Cholesterol increased, LDL increased, ALT increased, AST increased

See also individual agents

Other Severe Less Common Reactions: lactic acidosis, hepatomegaly, nephrotoxicity, rhabdomyolysis, myopathy, osteomalacia, fractures, pancreatitis, neutropenia, immune reconstitution syndrome, autoimmune disorders, hypersensitivity reaction, depression, suicidality, fat redistribution.

**Contraindications:**

Concurrent use of carbamazepine, dexamethasone (>1 dose), oxcarbazepine, phenobarbital, phenytoin, proton pump inhibitors (PPIs), rifabutin, rifampin, rifapentine or St. John's wort.

**U.S. Boxed Warning:**

Lactic acidosis and severe hepatomegaly with steatosis have been reported with nucleoside analogues (eg, tenofovir), including fatal cases. Suspend treatment if clinical or laboratory findings suggest lactic acidosis or hepatotoxicity.

Safety and efficacy during coinfection of HIV and HBV have not been established; acute, severe exacerbations of HBV have been reported following discontinuation of antiretroviral therapy. Not indicated for treatment of chronic hepatitis B. Monitor hepatic function closely for at least several months in HBV/HIV co-infected patients who discontinue emtricitabine/rilpivirine/tenofovir; initiate anti-HBV treatment if needed.

**References:**

1. Azijn H, Tirry I, Vingerhoets J, et al, "TMC278, a Next-Generation Nonnucleoside Reverse Transcriptase Inhibitor (NNRTI), Active Against Wild-Type and NNRTI-Resistant HIV-1," *Antimicrob Agents Chemother*, 2010, 54(2):718-27. [PubMed 19933797]
2. Cohen CJ, Andrade-Villanueva J, Clotet B, et al, "Rilpivirine Versus Efavirenz With Two Background Nucleoside or Nucleotide Reverse Transcriptase Inhibitors in Treatment-Naive



Adults Infected with HIV-1 (THRIVE): A Phase 3, Randomized, Non-Inferiority Trial," *Lancet*, 2011, 378(9787):229-37. [PubMed 21763935]

3. DHHS Panel on Antiretroviral Guidelines for Adults and Adolescents, "Guidelines for the Use of Antiretroviral Agents in HIV-1-Infected Adults and Adolescents, Department of Health and Human Services," February 12, 2013;1-267. Available at <http://www.aidsinfo.nih.gov>
4. DHHS, "Supplemental Information Regarding the Role of Rilpivirine (RPV) as Initial Therapy – August 16, 2011." Available at: [http://aidsinfo.nih.gov/contentfiles/NNRTI\\_One\\_Page\\_Info-RPV.pdf](http://aidsinfo.nih.gov/contentfiles/NNRTI_One_Page_Info-RPV.pdf)
5. MacArthur RD, "Clinical Trial Report: TMC278 (Rilpivirine) versus Efavirenz as Initial Therapy in Treatment-Naive, HIV-1-Infected Patients," *Curr Infect Dis Rep*, 2011, 13(1):1-3. [PubMed 21308448]
6. Molina JM, Cahn P, Grinsztejn B, et al, "Rilpivirine Versus Efavirenz With Tenofovir and Emtricitabine in Treatment-Naive Adults Infected With HIV-1 (ECHO): A Phase 3 Randomized Double-Blind Active-Controlled Trial," *Lancet*, 2011, 378(9787): 238-46. [PubMed 21763936]
7. Pozniak AL, Morales-Ramirez J, Katabira E, et al, "Efficacy and Safety of TMC278 in Antiretroviral-Naïve HIV-1 Patients: Week 96 Results of a Phase IIb Randomized Trial," *AIDS*, 2010, 24(1):55-65. [PubMed 19926964]
8. [www.uptodate.com](http://www.uptodate.com): Rilpivirine, emtricitabine and tenofovir: Drug information
9. [www.epocrates.com](http://www.epocrates.com): Complera (emtricitabine/rilpivirine/tenofovir disoproxil) Drug information

**REVISION HISTORY:**

Date Reviewed/No Updates: 1/13/15 by C. Sanders, MD

Date Approved by P&T Committee: 1/27/15

Date Reviewed/Updated: 2/17/15 by C. Sanders, MD; R. Sterling, MD

Date Approved by P&T Committee: 1/26/16

Date Reviewed/No Updates: 1/24/17 by C. Sanders, MD

Date Approved by P&T Committee: 1/24/17

Date Reviewed/No Updates: 1/23/18 by C. Sanders, MD

Date Approved by P&T Committee: 1/23/18

Date Reviewed/No Updates: 1/22/19 by C. Sanders, MD; R. Sterling, MD

Date Approved by P&T Committee: 1/22/19

Date Reviewed/No Updates: 2/18/20 by H. Taekman, MD; R. Sterling, MD

Date Approved by P&T Committee: 2/18/20

| Revision Date | Content Revised (Yes/No) | Contributors                               | Review/Revision Notes |
|---------------|--------------------------|--|-----------------------|
| 1/24/17       | No                       | Catherine Sanders, MD; Robert Sterling, MD | Annual review         |
| 1/23/18       | No                       | Catherine Sanders, MD; Robert Sterling, MD | Annual review         |



VENTURA COUNTY  
HEALTH CARE PLAN

|         |    |  |               |
|---------|----|--|---------------|
| 1/22/19 | No | Catherine Sanders, MD; Robert Sterling, MD | Annual review |
| 2/18/20 | No | Howard Taekman, MD; Robert Sterling, MD    | Annual review |