

Stavudine PK Fact Sheet

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Details

Generic Name Stavudine (d4T)

Trade Name Zerit®

Class Nucleoside Reverse Transcriptase Inhibitor

Molecular Weight 224.2

Structure

Summary of Key Pharmacokinetic Parameters

Stavudine is phosphorylated by cellular kinases to the active stavudine triphosphate.

Linearity/non-linearity Cmax and AUC increased dose-proportionally in the dose ranges, 0.033-4.0 mg/kg (oral) and

0.0625-0.75 mg/kg (IV).

Plasma half life 1.3-2.3 h

Cmax $536 \pm 146 \text{ ng/ml}$ (40 mg twice daily)

Cmin $9 \pm 8 \text{ ng/ml}$ (40 mg twice daily)

AUC 1284 \pm 227 ng/ml.hr (40 mg twice daily)

Bioavailability 86 ± 18%

Absorption For optimal absorption, stavudine should be taken on an empty stomach (i.e. at least 1 hour

prior to meals) but, if this is not possible, it may be taken with a light meal.

Protein BindingNegligibleVolume of Distribution $46 \pm 21 L$ CSF:Plasma ratio 0.39 ± 0.06 Semen:Plasma ratio $0.46-5.9^{[1]}$ Renal Clearance35-40%

Renal Impairment Clearance of stavudine decreases as creatinine clearance decreases; the manufacturers

recommend that dosage is adjusted in patients with reduced renal function.

Hepatic Impairment Stavudine pharmacokinetics in patients with hepatic impairment were similar to those in

patients with normal hepatic function.



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Metabolism and Distribution

Metabolised by Not elucidated in humans

Inducer of

Inhibitor of Does NOT inhibit the major cytochrome P450 isoforms CYP1A2, CYP2C9, CYP2C19, CYP2D6, and

CYP3A4.

Transported by Unknown

References

Unless otherwise stated (see below), information is from:

Zerit® Summary of Product Characteristics, Bristol-Myers Squibb Pharmaceuticals Ltd.

Zerit® US Prescribing Information, Bristol-Myers Squibb.

1. Taylor S, van Heeswijk RP, Hoetelmans RM, et al. Concentrations of nevirapine, lamivudine and stavudine in semen of HIV-1-infected men. AIDS. 2000; 14(13): 1979-1984.