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## A Study to Evaluate the Safety and Efficacy of Raltegravir (MK0518) in HIV-Infected Patients Failing Current Antiretroviral Therapies (MK0518-018 EXT2)

**This study has been completed.**

**Sponsor:**

Merck Sharp & Dohme Corp.

**Information provided by (Responsible Party):**

Merck Sharp & Dohme Corp.

**ClinicalTrials.gov Identifier:**

NCT00293267

First received: February 14, 2006

Last updated: September 4, 2015

Last verified: September 2015

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### Purpose

This study will investigate the safety and efficacy of raltegravir as a therapy for HIV-infected patients failing current therapy with 3-class antiviral resistance.

<u>Condition</u>	<u>Intervention</u>	<u>Phase</u>
HIV Infections	Drug: raltegravir potassium Drug: Comparator: Placebo	Phase 3

Study Type: **Interventional**

Study Design: **Allocation: Randomized**

**Endpoint Classification: Safety/Efficacy Study**

**Intervention Model: Parallel Assignment**

**Masking: Double Blind (Subject, Investigator)**

**Primary Purpose: Treatment**

**Official Title:** A Multicenter, Double-Blind, Randomized, Placebo-Controlled Study to Evaluate the Safety and Antiretroviral Activity of MK-0518 in Combination With an Optimized Background Therapy (OBT), Versus Optimized Background Therapy Alone, in HIV-Infected Patients With Documented Resistance to at Least 1 Drug in Each of the 3 Classes of Licensed Oral Antiviral Therapies

**Resource links provided by NLM:**

[MedlinePlus](#) related topics: [HIV/AIDS](#) [Potassium](#)

[Drug Information](#) available for: [Raltegravir](#) [Raltegravir potassium](#)

[U.S. FDA Resources](#)

**Further study details as provided by Merck Sharp & Dohme Corp.:**

Primary Outcome Measures:

- Percentage of Participants Achieving HIV RNA <400 Copies/mL at Week 16 [ Time Frame: 16 Weeks ] [ Designated as safety issue: No ]  
Percentage of participants who achieved HIV RNA <400 copies/mL at Week 16
- Percentage of Participants Achieving HIV RNA <400 Copies/mL at Week 48 [ Time Frame: 48 Weeks ] [ Designated as safety issue: No ]  
Percentage of participants who achieved HIV RNA <400 copies/mL at Week 48
- Double-Blind Extension - Week 156: Percentage of Participants Achieving HIV RNA <400 Copies/mL [ Time Frame: 156 Weeks ]  
[ Designated as safety issue: No ]  
Percentage of participants who achieved HIV RNA <400 copies/mL at Week 156
- Open-Label Extension - Week 240: Percentage of Participants Achieving HIV RNA <400 Copies/mL [ Time Frame: 240 Weeks ]  
[ Designated as safety issue: No ]  
Percentage of participants who achieved HIV RNA <400 Copies/mL at Week 240

Secondary Outcome Measures:

- Percentage of Participants Achieving HIV RNA <50 Copies/mL at Week 16 [ Time Frame: 16 Weeks ] [ Designated as safety issue: No ]  
Percentage of participants who achieved HIV RNA <50 copies/mL at Week 16
- Percentage of Participants Achieving HIV RNA <50 Copies/mL at Week 48 [ Time Frame: 48 Weeks ] [ Designated as safety issue: No ]  
Percentage of participants who achieved HIV RNA <50 copies/mL at Week 48
- Double-Blind Extension - Week 156: Percentage of Participants Achieving HIV RNA <50 Copies/mL [ Time Frame: 156 weeks ]  
[ Designated as safety issue: No ]  
Percentage of participants who achieved HIV RNA <50 copies/mL at Week 156
- Open-Label Extension - Week 240: Percentage of Participants Achieving HIV RNA <50 Copies/mL [ Time Frame: 240 weeks ]  
[ Designated as safety issue: No ]  
Percentage of participants who achieved HIV RNA <50 copies/mL at Week 240
- Double-Blind Extension - Week 156: Percentage of Participants Without Loss of Virologic Response [ Time Frame: 156 weeks ]  
[ Designated as safety issue: No ]  
For participants with confirmed HIV RNA levels <50 copies/mL on 2 consecutive visits, loss of virologic response is the occurrence of the first value >50 copies/mL or loss to follow-up; participants who never achieved HIV RNA <50 copies/mL on 2 consecutive visits are also considered as having loss of virologic response. Events are the numbers of participants with loss of virologic response versus the numbers of participants with no loss of virologic response (event free).
- Change From Baseline in HIV RNA (log10 Copies/mL) at Week 16 [ Time Frame: Baseline and Week 16 ] [ Designated as safety issue: No ]  
Mean change from baseline at Week 16 in HIV RNA (log10 copies/mL)
- Change From Baseline in HIV RNA (log10 Copies/mL) at Week 48 [ Time Frame: Baseline and Week 48 ] [ Designated as safety issue: No ]  
Mean change from baseline at Week 48 in HIV RNA (log10 copies/mL)
- Double-Blind Extension - Week 156: Change From Baseline in HIV RNA (log10 Copies/mL) [ Time Frame: Baseline and Week 156 ]  
[ Designated as safety issue: No ]  
Mean change from baseline at Week 156 in HIV RNA (log10 copies/mL)
- Open-Label Extension - Week 240: Change From Baseline in HIV RNA (log10 Copies/mL) [ Time Frame: Baseline and Week 240 ]  
[ Designated as safety issue: No ]  
Mean change from baseline at Week 240 in HIV RNA (log10 copies/mL)
- Change From Baseline in CD4 Cell Count (Cells/mm<sup>3</sup>) at Week 16 [ Time Frame: Baseline and Week 16 ] [ Designated as safety issue: No ]  
Mean change from baseline at Week 16 in CD4 Cell Count (cells/mm<sup>3</sup>)

- Change From Baseline in CD4 Cell Count (Cells/mm<sup>3</sup>) at Week 48 [ Time Frame: Baseline and Week 48 ] [ Designated as safety issue: No ]  
Mean change from baseline at Week 48 in CD4 Cell Count (cells/mm<sup>3</sup>)
- Double-Blind Extension - Week 156: Change From Baseline in CD4 Cell Count (Cells/mm<sup>3</sup>) [ Time Frame: Baseline and Week 156 ]  
[ Designated as safety issue: No ]  
Mean change from baseline at Week 156 in CD4 Cell Count (cells/mm<sup>3</sup>)
- Open-Label Extension - Week 240: Change From Baseline in CD4 Cell Count (Cells/mm<sup>3</sup>) [ Time Frame: Baseline and Week 240 ]  
[ Designated as safety issue: No ]  
Mean change from baseline at Week 240 in CD4 Cell Count (cells/mm<sup>3</sup>)

Enrollment: 352  
 Study Start Date: February 2006  
 Study Completion Date: May 2011  
 Primary Completion Date: August 2007 (Final data collection date for primary outcome measure)

Arms	Assigned Interventions
Experimental: 1 raltegravir potassium	Drug: raltegravir potassium Raltegravir 400 mg twice daily (b.i.d.) by mouth (p.o.) with optimized background therapy. Treatment period of 48 weeks. Other Name: ISENTRESS™
Placebo Comparator: 2 Placebo	Drug: Comparator: Placebo Placebo b.i.d. p.o. with optimized background therapy. Treatment period of 48 weeks.

#### Detailed Description:

The primary double-blind study of raltegravir versus placebo was extended to 156 weeks and was followed by an open-label raltegravir phase in which continuing participants from both the raltegravir and placebo groups received open-label raltegravir for an additional 84 weeks for a maximum duration of up to 240 weeks. Participants who had viral failure after Week 16 may have received open-label raltegravir until Week 240.

#### Eligibility

Ages Eligible for Study: 16 Years and older  
 Genders Eligible for Study: Both  
 Accepts Healthy Volunteers: No

#### Criteria

##### Inclusion Criteria:

- Patient must be HIV positive with HIV RNA values that are within ranges required by the study
- Patient must have documented failure of certain antiretroviral therapy
- Patient must be on the same antiretroviral therapy for at least the past two months

##### Exclusion Criteria:

- Patient is less than 16 years old
- Additional study criteria will be discussed and identified by the study doctor

#### Contacts and Locations

Choosing to participate in a study is an important personal decision. Talk with your doctor and family members or friends about deciding to join a study. To learn more about this study, you or your doctor may contact the study research staff using the Contacts provided below. For general information, see [Learn About Clinical Studies](#).

Please refer to this study by its ClinicalTrials.gov identifier: NCT00293267

## Sponsors and Collaborators

Merck Sharp & Dohme Corp.

## Investigators

Study Director: Medical Monitor Merck Sharp & Dohme Corp.

## More Information

Publications:

[Steigbigel RT, Cooper DA, Teppler H, Eron JJ, Gatell JM, Kumar PN, Rockstroh JK, Schechter M, Katlama C, Markowitz M, Yeni P, Loutfy MR, Lazzarin A, Lennox JL, Clotet B, Zhao J, Wan H, Rhodes RR, Strohmaier KM, Barnard RJ, Isaacs RD, Nguyen BY; BENCHMRK Study Teams. Long-term efficacy and safety of Raltegravir combined with optimized background therapy in treatment-experienced patients with drug-resistant HIV infection: week 96 results of the BENCHMRK 1 and 2 Phase III trials. Clin Infect Dis. 2010 Feb 15;50\(4\):605-12. doi: 10.1086/650002.](#)

[Steigbigel RT, Cooper DA, Kumar PN, Eron JE, Schechter M, Markowitz M, Loutfy MR, Lennox JL, Gatell JM, Rockstroh JK, Katlama C, Yeni P, Lazzarin A, Clotet B, Zhao J, Chen J, Ryan DM, Rhodes RR, Killar JA, Gilde LR, Strohmaier KM, Meibohm AR, Miller MD, Hazuda DJ, Nessly ML, DiNubile MJ, Isaacs RD, Nguyen BY, Teppler H; BENCHMRK Study Teams. Raltegravir with optimized background therapy for resistant HIV-1 infection. N Engl J Med. 2008 Jul 24;359\(4\):339-54. doi: 10.1056/NEJMoa0708975.](#)

[Cooper DA, Steigbigel RT, Gatell JM, Rockstroh JK, Katlama C, Yeni P, Lazzarin A, Clotet B, Kumar PN, Eron JE, Schechter M, Markowitz M, Loutfy MR, Lennox JL, Zhao J, Chen J, Ryan DM, Rhodes RR, Killar JA, Gilde LR, Strohmaier KM, Meibohm AR, Miller MD, Hazuda DJ, Nessly ML, DiNubile MJ, Isaacs RD, Teppler H, Nguyen BY; BENCHMRK Study Teams. Subgroup and resistance analyses of raltegravir for resistant HIV-1 infection. N Engl J Med. 2008 Jul 24;359\(4\):355-65. doi: 10.1056/NEJMoa0708978.](#)

Responsible Party: Merck Sharp & Dohme Corp.  
ClinicalTrials.gov Identifier: [NCT00293267](#) [History of Changes](#)  
Other Study ID Numbers: **0518-018** 2005\_096  
Study First Received: February 14, 2006  
Results First Received: August 18, 2009  
Last Updated: September 4, 2015  
Health Authority: France: Ministry of Health

Keywords provided by Merck Sharp & Dohme Corp.:  
Treatment Experienced

ClinicalTrials.gov processed this record on March 10, 2016

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## A Study to Evaluate the Safety and Efficacy of Raltegravir (MK0518) in HIV-Infected Patients Failing Current Antiretroviral Therapies (MK0518-018 EXT2)

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**Study Results**

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Results First Received: August 18, 2009

<b>Study Type:</b>	Interventional
<b>Study Design:</b>	Allocation: Randomized; Endpoint Classification: Safety/Efficacy Study; Intervention Model: Parallel Assignment; Masking: Double Blind (Subject, Investigator); Primary Purpose: Treatment
<b>Condition:</b>	HIV Infections
<b>Interventions:</b>	Drug: raltegravir potassium Drug: Comparator: Placebo

**Participant Flow**

[Hide Participant Flow](#)

**Recruitment Details**

**Key information relevant to the recruitment process for the overall study, such as dates of the recruitment period and locations**

Phase 3; First Patient In: Mar 2006; Last Patient Last Visit (LPLV) Week 48: Aug 2007; 61 of 63 sites in Australia, Belgium, Denmark, France, Germany, Italy, Peru, Portugal, Spain, Switzerland, Taiwan, Thailand randomized patients. Extension Study LPLV Week 240: June 2011

**Pre-Assignment Details**

**Significant events and approaches for the overall study following participant enrollment, but prior to group assignment**

Patients failed prior antiretroviral therapy (HIV RNA >1000 copies/mL), and had documented resistance to at least one drug in each class of licensed oral antiretroviral therapy (Nucleoside Reverse Transcriptase inhibitors, Non-Nucleoside Reverse Transcriptase inhibitors and Protease Inhibitors). All patients must have met laboratory criteria.

## Reporting Groups

	Description
Raltegravir 400 mg b.i.d. + OBT	No text entered.
Placebo + OBT	No text entered.

## Participant Flow for 4 periods

## Period 1: Primary Study - Double-Blind Week 0-48

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>STARTED</b>	234	118
<b>Treated</b>	232	118
<b>Continuing in Double-Blind</b>	193 [1]	50
<b>COMPLETED</b>	193	50
<b>NOT COMPLETED</b>	41	68
Never Treated	2	0
Adverse Event	1	1
Death	3	3
Lack of Efficacy	0	2
Lost to Follow-up	1	1
Withdrawal by Subject	1	1
Entered OLPVF Phase	33	60

[1] Excludes participants who entered the open-label post virological failure (OLPVF) phase

## Period 2: Extension - Double-Blind Week 49-156

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>STARTED</b>	191 [1]	50
<b>COMPLETED</b>	139	35
<b>NOT COMPLETED</b>	52	15
Adverse Event	1	4
Lack of Efficacy	7	1
Lost to Follow-up	4	0
Withdrawal by Subject	13	4
Death	3	0
Participant relocated or site terminated	2	0
Other Reason	7	0
Entered OLPVF Phase	15	6

[1] 2 participants who completed Week 48 did not enter the extension study

**Period 3: Extension - Open-Label Week 157-240**

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>STARTED</b>	131 [1]	28 [2]
<b>COMPLETED</b>	111	26
<b>NOT COMPLETED</b>	20	2
Adverse Event	5	0
Lack of Efficacy	7	0
Lost to Follow-up	1	0
Withdrawal by Subject	2	1
Participant relocated or site terminated	2	0
Other Reason	3	1

[1] 8 of 139 participants who completed the double-blind phase did not enter this open-label phase

[2] 7 of 35 participants who completed the double-blind phase did not enter this open-label phase

**Period 4: Open-Label Post Virologic Failure Phase**

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>STARTED</b>	48 [1]	66 [1]
<b>COMPLETED</b>	15	29
<b>NOT COMPLETED</b>	33	37
Adverse Event	2	3
Lack of Efficacy	23	19
Withdrawal by Subject	2	4
Lost to Follow-up	2	2
Laboratory Adverse Event	0	2
Participant Moved or Site Terminated	0	2
Other Reason	4	5

[1] Number of participants who failed treatment and consented to enter the OLPVF phase

**Baseline Characteristics**

 Hide Baseline Characteristics

**Population Description**

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.

No text entered.

**Reporting Groups**

	Description
Raltegravir 400 mg b.i.d. + OBT	No text entered.
Placebo + OBT	No text entered.
Total	Total of all reporting groups

### Baseline Measures

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT	Total
<b>Number of Participants</b> [units: participants]	232	118	350
<b>Age</b> [units: Years] Mean (Full Range)	46.1 (16 to 74)	43.7 (19 to 64)	45.3 (16 to 74)
<b>Gender</b> [units: participants]			
Female	37	15	52
Male	195	103	298
<b>Race/Ethnicity, Customized</b> [units: participants]			
White	174	96	270
Black	18	5	23
Asian	14	5	19
Hispanic	6	1	7
Other	20	11	31
<b>Cluster of Differentiation 4 (CD4) Cell Count</b> [units: cells/mm <sup>3</sup> ] Mean (Full Range)	156 (1 to 792)	153 (3 to 759)	155 (1 to 792)
<b>Plasma Human Immunodeficiency Virus (HIV) Ribonucleic Acid (RNA)</b> [units: copies/mL] Geometric Mean (Full Range)	40519 (441 to 750000)	31828 (200 to 750000)	37352 (200 to 750000)

### Outcome Measures

 Hide All Outcome Measures

1. Primary: Percentage of Participants Achieving HIV RNA <400 Copies/mL at Week 16 [ Time Frame: 16 Weeks ]

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Percentage of Participants Achieving HIV RNA <400 Copies/mL at Week 16
<b>Measure Description</b>	Percentage of participants who achieved HIV RNA <400 copies/mL at Week 16
<b>Time Frame</b>	16 Weeks
<b>Safety Issue</b>	No

**Population Description**

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.

No text entered.

**Reporting Groups**

	Description
Raltegravir 400 mg b.i.d. + OBT	No text entered.
Placebo + OBT	No text entered.

**Measured Values**

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>Number of Participants Analyzed</b> [units: participants]	229	117
<b>Percentage of Participants Achieving HIV RNA &lt;400 Copies/mL at Week 16</b> [units: Percentage of Participants] Number (95% Confidence Interval)	77.7 (71.8 to 82.9)	41.0 (32.0 to 50.5)

No statistical analysis provided for Percentage of Participants Achieving HIV RNA <400 Copies/mL at Week 16

2. Primary: Percentage of Participants Achieving HIV RNA <400 Copies/mL at Week 48 [ Time Frame: 48 Weeks ]

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Percentage of Participants Achieving HIV RNA <400 Copies/mL at Week 48
<b>Measure Description</b>	Percentage of participants who achieved HIV RNA <400 copies/mL at Week 48
<b>Time Frame</b>	48 Weeks
<b>Safety Issue</b>	No

**Population Description**

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.

Participants who experienced virologic failure after Week 16 are also counted as treatment failures for the subsequent virologic efficacy analyses.

**Reporting Groups**

	Description
Raltegravir 400 mg b.i.d. + OBT	No text entered.
Placebo + OBT	No text entered.

**Measured Values**

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>Number of Participants Analyzed</b> [units: participants]	231	118
<b>Percentage of Participants Achieving HIV RNA &lt;400 Copies/mL at Week 48</b> [units: Percentage of Participants] Number (95% Confidence Interval)	73.6 (67.4 to 79.2)	36.4 (27.8 to 45.8)

No statistical analysis provided for Percentage of Participants Achieving HIV RNA <400 Copies/mL at Week 48

3. Primary: Double-Blind Extension - Week 156: Percentage of Participants Achieving HIV RNA <400 Copies/mL [ Time Frame: 156 Weeks ]

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Double-Blind Extension - Week 156: Percentage of Participants Achieving HIV RNA <400 Copies/mL
<b>Measure Description</b>	Percentage of participants who achieved HIV RNA <400 copies/mL at Week 156
<b>Time Frame</b>	156 Weeks
<b>Safety Issue</b>	No

**Population Description**

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

The analysis population was based on a non-completer equals failure approach where missing values for participants who discontinued the study for any reason were considered treatment failures.

Participants who experienced virologic failure after Week 16 are counted also as treatment failures for the subsequent virologic efficacy analyses.

**Reporting Groups**

	Description
Raltegravir 400 mg b.i.d. + OBT	No text entered.
Placebo + OBT	No text entered.

**Measured Values**

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>Number of Participants Analyzed</b> [units: participants]	232	117
<b>Double-Blind Extension - Week 156: Percentage of Participants Achieving HIV RNA &lt;400 Copies/mL</b> [units: Percentage of Participants] Number (95% Confidence Interval)	57.3 (50.7 to 63.8)	25.6 (18.0 to 34.5)

No statistical analysis provided for Double-Blind Extension - Week 156: Percentage of Participants Achieving HIV RNA <400 Copies/mL

4. Primary: Open-Label Extension - Week 240: Percentage of Participants Achieving HIV RNA <400 Copies/mL [ Time Frame: 240 Weeks ]

<b>Measure Type</b>	Primary
<b>Measure Title</b>	Open-Label Extension - Week 240: Percentage of Participants Achieving HIV RNA <400 Copies/mL
<b>Measure Description</b>	Percentage of participants who achieved HIV RNA <400 Copies/mL at Week 240
<b>Time Frame</b>	240 Weeks
<b>Safety Issue</b>	No

**Population Description**

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

The analysis population was based on a non-completer equals failure approach where missing values for participants who discontinued the study for any reason were considered treatment failures.

Participants who experienced virologic failure after Week 16 are also counted as treatment failures for the subsequent virologic efficacy analyses.

**Reporting Groups**

	Description
<b>Raltegravir 400 mg b.i.d. + OBT</b>	Raltegravir 400 mg b.i.d plus OBT includes all participants initially randomized to raltegravir. Those who did not experience virologic failure by Week 156 may have continued into the open-label phase. During the open-label phase, these participants continued to receive raltegravir plus OBT until Week 240.
<b>Placebo + OBT</b>	Placebo plus OBT includes all participants initially randomized to placebo. Those who did not experience virologic failure by Week 156 may have continued into the open-label phase. During the open-label phase, these participants received raltegravir plus OBT until Week 240.

**Measured Values**

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>Number of Participants Analyzed</b> [units: participants]	232	118
<b>Open-Label Extension - Week 240: Percentage of Participants Achieving HIV RNA &lt;400 Copies/mL</b> [units: Percentage of Participants] Number (95% Confidence Interval)	45.3 (38.7 to 51.9)	20.3 (13.5 to 28.7)

No statistical analysis provided for Open-Label Extension - Week 240: Percentage of Participants Achieving HIV RNA <400 Copies/mL

5. Secondary: Percentage of Participants Achieving HIV RNA <50 Copies/mL at Week 16 [ Time Frame: 16 Weeks ]

<b>Measure Type</b>	Secondary
<b>Measure Title</b>	Percentage of Participants Achieving HIV RNA <50 Copies/mL at Week 16
<b>Measure Description</b>	Percentage of participants who achieved HIV RNA <50 copies/mL at Week 16
<b>Time Frame</b>	16 Weeks

<b>Safety Issue</b>	No
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**Population Description**

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.

No text entered.

**Reporting Groups**

	Description
<b>Raltegravir 400 mg b.i.d. + OBT</b>	No text entered.
<b>Placebo + OBT</b>	No text entered.

**Measured Values**

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>Number of Participants Analyzed</b> [units: participants]	229	117
<b>Percentage of Participants Achieving HIV RNA &lt;50 Copies/mL at Week 16</b> [units: Percentage of Participants] Number (95% Confidence Interval)	61.6 (54.9 to 67.9)	33.3 (24.9 to 42.6)

No statistical analysis provided for Percentage of Participants Achieving HIV RNA <50 Copies/mL at Week 16

6. Secondary: Percentage of Participants Achieving HIV RNA <50 Copies/mL at Week 48 [ Time Frame: 48 Weeks ]

<b>Measure Type</b>	Secondary
<b>Measure Title</b>	Percentage of Participants Achieving HIV RNA <50 Copies/mL at Week 48
<b>Measure Description</b>	Percentage of participants who achieved HIV RNA <50 copies/mL at Week 48
<b>Time Frame</b>	48 Weeks
<b>Safety Issue</b>	No

**Population Description**

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.

Participants who experienced virologic failure after Week 16 are also counted as treatment failures for the subsequent virologic efficacy analyses.

**Reporting Groups**

	Description
<b>Raltegravir 400 mg b.i.d. + OBT</b>	No text entered.
<b>Placebo + OBT</b>	No text

entered.

**Measured Values**

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>Number of Participants Analyzed</b> [units: participants]	231	118
<b>Percentage of Participants Achieving HIV RNA &lt;50 Copies/mL at Week 48</b> [units: Percentage of Participants] Number (95% Confidence Interval)	64.5 (58.0 to 70.7)	31.4 (23.1 to 40.5)

No statistical analysis provided for Percentage of Participants Achieving HIV RNA <50 Copies/mL at Week 48

7. Secondary: Double-Blind Extension - Week 156: Percentage of Participants Achieving HIV RNA <50 Copies/mL [ Time Frame: 156 weeks ]

<b>Measure Type</b>	Secondary
<b>Measure Title</b>	Double-Blind Extension - Week 156: Percentage of Participants Achieving HIV RNA <50 Copies/mL
<b>Measure Description</b>	Percentage of participants who achieved HIV RNA <50 copies/mL at Week 156
<b>Time Frame</b>	156 weeks
<b>Safety Issue</b>	No

**Population Description**

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.

Participants who experienced virologic failure after Week 16 are also counted as treatment failures for the subsequent virologic efficacy analyses.

**Reporting Groups**

	Description
<b>Raltegravir 400 mg b.i.d. + OBT</b>	No text entered.
<b>Placebo + OBT</b>	No text entered.

**Measured Values**

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>Number of Participants Analyzed</b> [units: participants]	232	117
<b>Double-Blind Extension - Week 156: Percentage of Participants Achieving HIV RNA &lt;50 Copies/mL</b> [units: Percentage of Participants] Number (95% Confidence Interval)	53.4 (46.8 to 60.0)	25.6 (18.0 to 34.5)

No statistical analysis provided for Double-Blind Extension - Week 156: Percentage of Participants Achieving HIV RNA <50 Copies/mL

8. Secondary: Open-Label Extension - Week 240: Percentage of Participants Achieving HIV RNA <50 Copies/mL [ Time Frame: 240 weeks ]

<b>Measure Type</b>	Secondary
<b>Measure Title</b>	Open-Label Extension - Week 240: Percentage of Participants Achieving HIV RNA <50 Copies/mL
<b>Measure Description</b>	Percentage of participants who achieved HIV RNA <50 copies/mL at Week 240
<b>Time Frame</b>	240 weeks
<b>Safety Issue</b>	No

**Population Description**

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

Participants who experienced virologic failure after Week 16 are also counted as treatment failures for the subsequent virologic efficacy analyses.

**Reporting Groups**

	Description
<b>Raltegravir 400 mg b.i.d. + OBT</b>	Raltegravir 400 mg b.i.d plus OBT includes all participants initially randomized to raltegravir. Those who did not experience virologic failure by Week 156 may have continued into the open-label phase. During the open-label phase, these participants continued to receive raltegravir plus OBT until Week 240.
<b>Placebo + OBT</b>	Placebo plus OBT includes all participants initially randomized to placebo. Those who did not experience virologic failure by Week 156 may have continued into the open-label phase. During the open-label phase, these participants received raltegravir plus OBT until Week 240.

**Measured Values**

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>Number of Participants Analyzed</b> [units: participants]	232	118
<b>Open-Label Extension - Week 240: Percentage of Participants Achieving HIV RNA &lt;50 Copies/mL</b> [units: Percentage of Participants] Number (95% Confidence Interval)	42.2 (35.8 to 48.9)	18.6 (12.1 to 26.9)

No statistical analysis provided for Open-Label Extension - Week 240: Percentage of Participants Achieving HIV RNA <50 Copies/mL

9. Secondary: Double-Blind Extension - Week 156: Percentage of Participants Without Loss of Virologic Response [ Time Frame: 156 weeks ]

<b>Measure Type</b>	Secondary
<b>Measure Title</b>	Double-Blind Extension - Week 156: Percentage of Participants Without Loss of Virologic Response
<b>Measure Description</b>	For participants with confirmed HIV RNA levels <50 copies/mL on 2 consecutive visits, loss of virologic response is the occurrence of the first value >50 copies/mL or loss to follow-up; participants who never achieved HIV RNA <50 copies/mL on 2 consecutive visits are also considered as having loss of virologic response. Events are the numbers of participants with loss of virologic response versus the numbers of participants with no loss of virologic response (event free).
<b>Time Frame</b>	156 weeks

<b>Safety Issue</b>	No
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**Population Description**

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

Participants who experienced virologic failure after Week 16 are also counted as treatment failures for the subsequent virologic efficacy analyses.

**Reporting Groups**

	Description
<b>Raltegravir 400 mg b.i.d. + OBT</b>	No text entered.
<b>Placebo + OBT</b>	No text entered.

**Measured Values**

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>Number of Participants Analyzed</b> [units: participants]	232	118
<b>Double-Blind Extension - Week 156: Percentage of Participants Without Loss of Virologic Response</b> [units: Percentage of Participants]	47.4	24.6

No statistical analysis provided for Double-Blind Extension - Week 156: Percentage of Participants Without Loss of Virologic Response

10. Secondary: Change From Baseline in HIV RNA (log10 Copies/mL) at Week 16 [ Time Frame: Baseline and Week 16 ]

<b>Measure Type</b>	Secondary
<b>Measure Title</b>	Change From Baseline in HIV RNA (log10 Copies/mL) at Week 16
<b>Measure Description</b>	Mean change from baseline at Week 16 in HIV RNA (log10 copies/mL)
<b>Time Frame</b>	Baseline and Week 16
<b>Safety Issue</b>	No

**Population Description**

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

Observed mean change from baseline in log10 plasma HIV RNA calculated using conventional imputation (replace <400 copies by 400 copies if signal detected; 200 copies if not detected); Missing values: baseline carry-forward for all failures/discontinued due to lack of efficacy

**Reporting Groups**

	Description
<b>Raltegravir 400 mg b.i.d. + OBT</b>	No text entered.

<b>Placebo + OBT</b>	No text entered.
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**Measured Values**

	<b>Raltegravir 400 mg b.i.d. + OBT</b>	<b>Placebo + OBT</b>
<b>Number of Participants Analyzed</b> [units: participants]	<b>231</b>	<b>118</b>
<b>Change From Baseline in HIV RNA (log10 Copies/mL) at Week 16</b> [units: HIV RNA (log10 copies/mL)] Mean (95% Confidence Interval)	<b>-1.85 (-1.97 to -1.73)</b>	<b>-0.78 (-0.97 to -0.59)</b>

No statistical analysis provided for Change From Baseline in HIV RNA (log10 Copies/mL) at Week 16

11. Secondary: Change From Baseline in HIV RNA (log10 Copies/mL) at Week 48 [ Time Frame: Baseline and Week 48 ]

<b>Measure Type</b>	Secondary
<b>Measure Title</b>	Change From Baseline in HIV RNA (log10 Copies/mL) at Week 48
<b>Measure Description</b>	Mean change from baseline at Week 48 in HIV RNA (log10 copies/mL)
<b>Time Frame</b>	Baseline and Week 48
<b>Safety Issue</b>	No

**Population Description**

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

Observed mean change from baseline in log10 plasma HIV RNA calculated using conventional imputation (replace <400 copies by 400 copies if signal detected; 200 copies if not detected); Missing values: baseline carry-forward for all failures/discontinued due to lack of efficacy  
Participants with virologic failure after Week 16 = treatment failures

**Reporting Groups**

	<b>Description</b>
<b>Raltegravir 400 mg b.i.d. + OBT</b>	No text entered.
<b>Placebo + OBT</b>	No text entered.

**Measured Values**

	<b>Raltegravir 400 mg b.i.d. + OBT</b>	<b>Placebo + OBT</b>
<b>Number of Participants Analyzed</b> [units: participants]	<b>231</b>	<b>118</b>
<b>Change From Baseline in HIV RNA (log10 Copies/mL) at Week 48</b> [units: HIV RNA (log10 copies/mL)] Mean (95% Confidence Interval)	<b>-1.67 (-1.81 to -1.54)</b>	<b>-0.68 (-0.86 to -0.50)</b>

**No statistical analysis provided for Change From Baseline in HIV RNA (log10 Copies/mL) at Week 48**

12. Secondary: Double-Blind Extension - Week 156: Change From Baseline in HIV RNA (log10 Copies/mL) [ Time Frame: Baseline and Week 156 ]

<b>Measure Type</b>	Secondary
<b>Measure Title</b>	Double-Blind Extension - Week 156: Change From Baseline in HIV RNA (log10 Copies/mL)
<b>Measure Description</b>	Mean change from baseline at Week 156 in HIV RNA (log10 copies/mL)
<b>Time Frame</b>	Baseline and Week 156
<b>Safety Issue</b>	No

**Population Description**

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

Observed mean change from baseline in log10 plasma HIV RNA calculated using conventional imputation (replace <400 copies by 400 copies if signal detected; 200 copies if not detected); Missing values: baseline carry-forward for all failures/discontinued due to lack of efficacy

Participants with virologic failure after Week 16 = treatment failures

**Reporting Groups**

	Description
<b>Raltegravir 400 mg b.i.d. + OBT</b>	No text entered.
<b>Placebo + OBT</b>	No text entered.

**Measured Values**

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>Number of Participants Analyzed</b> [units: participants]	207	107
<b>Double-Blind Extension - Week 156: Change From Baseline in HIV RNA (log10 Copies/mL)</b> [units: HIV RNA (log10 copies/mL)] Mean (95% Confidence Interval)	-1.44 (-1.60 to -1.28)	-0.51 (-0.67 to -0.34)

**No statistical analysis provided for Double-Blind Extension - Week 156: Change From Baseline in HIV RNA (log10 Copies/mL)**

13. Secondary: Open-Label Extension - Week 240: Change From Baseline in HIV RNA (log10 Copies/mL) [ Time Frame: Baseline and Week 240 ]

<b>Measure Type</b>	Secondary
<b>Measure Title</b>	Open-Label Extension - Week 240: Change From Baseline in HIV RNA (log10 Copies/mL)
<b>Measure Description</b>	Mean change from baseline at Week 240 in HIV RNA (log10 copies/mL)

<b>Time Frame</b>	Baseline and Week 240
<b>Safety Issue</b>	No

**Population Description**

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

Observed mean change from baseline in log10 plasma HIV RNA calculated using conventional imputation (replace <400 copies by 400 copies if signal detected; 200 copies if not detected); Missing values: baseline carry-forward for all failures/discontinued due to lack of efficacy

Participants with virologic failure after Week 16 = treatment failures

**Reporting Groups**

	Description
<b>Raltegravir 400 mg b.i.d. + OBT</b>	Raltegravir 400 mg b.i.d plus OBT includes all participants initially randomized to raltegravir. Those who did not experience virologic failure by Week 156 may have continued into the open-label phase. During the open-label phase, these participants continued to receive raltegravir plus OBT until Week 240.
<b>Placebo + OBT</b>	Placebo plus OBT includes all participants initially randomized to placebo. Those who did not experience virologic failure by Week 156 may have continued into the open-label phase. During the open-label phase, these participants received raltegravir plus OBT until Week 240.

**Measured Values**

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>Number of Participants Analyzed</b> [units: participants]	188	100
<b>Open-Label Extension - Week 240: Change From Baseline in HIV RNA (log10 Copies/mL)</b> [units: HIV RNA (log10 copies/mL)] Mean (95% Confidence Interval)	-1.24 (-1.42 to -1.07)	-0.45 (-0.62 to -0.27)

No statistical analysis provided for Open-Label Extension - Week 240: Change From Baseline in HIV RNA (log10 Copies/mL)

14. Secondary: Change From Baseline in CD4 Cell Count (Cells/mm<sup>3</sup>) at Week 16 [ Time Frame: Baseline and Week 16 ]

<b>Measure Type</b>	Secondary
<b>Measure Title</b>	Change From Baseline in CD4 Cell Count (Cells/mm <sup>3</sup> ) at Week 16
<b>Measure Description</b>	Mean change from baseline at Week 16 in CD4 Cell Count (cells/mm <sup>3</sup> )
<b>Time Frame</b>	Baseline and Week 16
<b>Safety Issue</b>	No

**Population Description**

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

Observed failure approach assuming baseline-carry-forward for all failures, exclude other missing values. Baseline CD4 cell count (cells/mm<sup>3</sup>) was carried forward for participants who discontinued assigned therapy due to lack of efficacy.

**Reporting Groups**

	Description
Raltegravir 400 mg b.i.d. + OBT	No text entered.
Placebo + OBT	No text entered.

**Measured Values**

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>Number of Participants Analyzed</b> [units: participants]	231	118
<b>Change From Baseline in CD4 Cell Count (Cells/mm<sup>3</sup>) at Week 16</b> [units: CD4 Cell Count (cells/mm <sup>3</sup> ) Mean (95% Confidence Interval)]	82.7 (70.5 to 94.9)	31.3 (17.8 to 44.8)

No statistical analysis provided for Change From Baseline in CD4 Cell Count (Cells/mm<sup>3</sup>) at Week 16

15. Secondary: Change From Baseline in CD4 Cell Count (Cells/mm<sup>3</sup>) at Week 48 [ Time Frame: Baseline and Week 48 ]

<b>Measure Type</b>	Secondary
<b>Measure Title</b>	Change From Baseline in CD4 Cell Count (Cells/mm <sup>3</sup> ) at Week 48
<b>Measure Description</b>	Mean change from baseline at Week 48 in CD4 Cell Count (cells/mm <sup>3</sup> )
<b>Time Frame</b>	Baseline and Week 48
<b>Safety Issue</b>	No

**Population Description**

Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.

Observed failure approach assuming baseline-carry-forward for all failures, exclude other missing values. Baseline CD4 cell count (cells/mm<sup>3</sup>) was carried forward for participants who discontinued assigned therapy due to lack of efficacy.

Participants with virologic failure after Week 16 are treatment failures for virologic efficacy analyses.

**Reporting Groups**

	Description
Raltegravir 400 mg b.i.d. + OBT	No text entered.
Placebo + OBT	No text entered.

**Measured Values**

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>Number of Participants Analyzed</b> [units: participants]	230	119

<b>Change From Baseline in CD4 Cell Count (Cells/mm<sup>3</sup>) at Week 48</b> [units: CD4 Cell Count (cells/mm <sup>3</sup> )] Mean (95% Confidence Interval)	<b>120.2 (102.2 to 138.1)</b>	<b>49.4 (30.4 to 68.5)</b>
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No statistical analysis provided for Change From Baseline in CD4 Cell Count (Cells/mm<sup>3</sup>) at Week 48

16. Secondary: Double-Blind Extension - Week 156: Change From Baseline in CD4 Cell Count (Cells/mm<sup>3</sup>) [ Time Frame: Baseline and Week 156 ]

<b>Measure Type</b>	Secondary
<b>Measure Title</b>	Double-Blind Extension - Week 156: Change From Baseline in CD4 Cell Count (Cells/mm <sup>3</sup> )
<b>Measure Description</b>	Mean change from baseline at Week 156 in CD4 Cell Count (cells/mm <sup>3</sup> )
<b>Time Frame</b>	Baseline and Week 156
<b>Safety Issue</b>	No

**Population Description**

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

Observed failure approach assuming baseline-carry-forward for all failures, exclude other missing values. Baseline CD4 cell count (cells/mm<sup>3</sup>) was carried forward for participants who discontinued assigned therapy due to lack of efficacy.

Participants with virologic failure after Week 16 are treatment failures for virologic efficacy analyses.

**Reporting Groups**

	Description
<b>Raltegravir 400 mg b.i.d. + OBT</b>	No text entered.
<b>Placebo + OBT</b>	No text entered.

**Measured Values**

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>Number of Participants Analyzed</b> [units: participants]	<b>207</b>	<b>107</b>
<b>Double-Blind Extension - Week 156: Change From Baseline in CD4 Cell Count (Cells/mm<sup>3</sup>)</b> [units: CD4 Cell Count (cells/mm <sup>3</sup> )] Mean (95% Confidence Interval)	<b>170.9 (144.4 to 197.4)</b>	<b>71.03 (46.28 to 95.77)</b>

No statistical analysis provided for Double-Blind Extension - Week 156: Change From Baseline in CD4 Cell Count (Cells/mm<sup>3</sup>)

17. Secondary: Open-Label Extension - Week 240: Change From Baseline in CD4 Cell Count (Cells/mm<sup>3</sup>) [ Time Frame: Baseline and Week 240 ]

<b>Measure Type</b>	Secondary
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<b>Measure Title</b>	Open-Label Extension - Week 240: Change From Baseline in CD4 Cell Count (Cells/mm <sup>3</sup> )
<b>Measure Description</b>	Mean change from baseline at Week 240 in CD4 Cell Count (cells/mm <sup>3</sup> )
<b>Time Frame</b>	Baseline and Week 240
<b>Safety Issue</b>	No

#### Population Description

**Explanation of how the number of participants for analysis was determined. Includes whether analysis was per protocol, intention to treat, or another method. Also provides relevant details such as imputation technique, as appropriate.**

Observed failure approach assuming baseline-carry-forward for all failures, exclude other missing values. Baseline CD4 cell count (cells/mm<sup>3</sup>) was carried forward for participants who discontinued assigned therapy due to lack of efficacy.

Participants with virologic failure after Week 16 are treatment failures for virologic efficacy analyses.

#### Reporting Groups

	Description
<b>Raltegravir 400 mg b.i.d. + OBT</b>	Raltegravir 400 mg b.i.d plus OBT includes all participants initially randomized to raltegravir. Those who did not experience virologic failure by Week 156 may have continued into the open-label phase. During the open-label phase, these participants continued to receive raltegravir plus OBT until Week 240.
<b>Placebo + OBT</b>	Placebo plus OBT includes all participants initially randomized to placebo. Those who did not experience virologic failure by Week 156 may have continued into the open-label phase. During the open-label phase, these participants received raltegravir plus OBT until Week 240.

#### Measured Values

	Raltegravir 400 mg b.i.d. + OBT	Placebo + OBT
<b>Number of Participants Analyzed</b> [units: participants]	186	101
<b>Open-Label Extension - Week 240: Change From Baseline in CD4 Cell Count (Cells/mm<sup>3</sup>)</b> [units: CD4 Cell Count (cells/mm <sup>3</sup> )] Mean (95% Confidence Interval)	193.6 (159.1 to 228.0)	68.2 (38.2 to 98.2)

No statistical analysis provided for Open-Label Extension - Week 240: Change From Baseline in CD4 Cell Count (Cells/mm<sup>3</sup>)

#### Serious Adverse Events

 Hide Serious Adverse Events

<b>Time Frame</b>	240 Weeks
<b>Additional Description</b>	Adverse events are reported by original treatment group for the entire 240-week study, including double-blind, open-label, and OLPVF phases; 94 of 118 participants in the placebo group also received raltegravir in the open-label or OLPVF phase.

#### Reporting Groups

	Description
<b>Raltegravir 400 mg b.i.d Plus OBT</b>	Includes all participants initially randomized to raltegravir, including those without virologic failure who continued into the open-label phase at Week 156 and those who entered the OLPVF phase due to virologic

	failure. During either open-label phase up to Week 240, these participants continued to receive raltegravir 400 mg b.i.d. plus OBT.
<b>Placebo Plus OBT</b>	Includes all participants initially randomized to placebo, including those without virologic failure who continued into the open-label phase at Week 156 and those who entered the OLPVF phase due to virologic failure. During either open-label phase up to Week 240, these participants continued to receive raltegravir 400 mg b.i.d. plus OBT.

### Serious Adverse Events

	Raltegravir 400 mg b.i.d Plus OBT	Placebo Plus OBT
<b>Total, serious adverse events</b>		
<b># participants affected / at risk</b>	<b>97/232 (41.81%)</b>	<b>46/118 (38.98%)</b>
<b>Blood and lymphatic system disorders</b>		
<b>Anaemia †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>2/232 (0.86%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>2</b>	<b>0</b>
<b>Haemolytic anaemia †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Haemolytic uraemic syndrome †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Leukopenia †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>0/232 (0.00%)</b>	<b>1/118 (0.85%)</b>
<b># events</b>	<b>0</b>	<b>2</b>
<b>Neutropenia †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>0/232 (0.00%)</b>	<b>1/118 (0.85%)</b>
<b># events</b>	<b>0</b>	<b>1</b>
<b>Splenic vein thrombosis †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Cardiac disorders</b>		
<b>Acute coronary syndrome †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>2/232 (0.86%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>2</b>	<b>0</b>
<b>Acute myocardial infarction †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Angina pectoris †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Angina unstable †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Cardiac arrest †<sup>1</sup></b>		

<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Cardio-respiratory arrest †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>0/232 (0.00%)</b>	<b>1/118 (0.85%)</b>
<b># events</b>	<b>0</b>	<b>1</b>
<b>Coronary artery disease †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>1/118 (0.85%)</b>
<b># events</b>	<b>1</b>	<b>1</b>
<b>Intracardiac thrombus †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Myocardial infarction †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>4/232 (1.72%)</b>	<b>2/118 (1.69%)</b>
<b># events</b>	<b>5</b>	<b>3</b>
<b>Pericarditis †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Congenital, familial and genetic disorders</b>		
<b>Phimosis †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Ear and labyrinth disorders</b>		
<b>Hypoacusis †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>0/232 (0.00%)</b>	<b>1/118 (0.85%)</b>
<b># events</b>	<b>0</b>	<b>1</b>
<b>Vertigo †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>0/232 (0.00%)</b>	<b>1/118 (0.85%)</b>
<b># events</b>	<b>0</b>	<b>1</b>
<b>Endocrine disorders</b>		
<b>Hyperthyroidism †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Myxoedema †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Eye disorders</b>		
<b>Uveitis †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>0/232 (0.00%)</b>	<b>1/118 (0.85%)</b>
<b># events</b>	<b>0</b>	<b>1</b>
<b>Gastrointestinal disorders</b>		
<b>Abdominal pain †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>2/232 (0.86%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>2</b>	<b>0</b>
<b>Anal fissure †<sup>1</sup></b>		

# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Ascites †1</b>		
# participants affected / at risk	2/232 (0.86%)	0/118 (0.00%)
# events	2	0
<b>Constipation †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Diarrhoea †1</b>		
# participants affected / at risk	3/232 (1.29%)	0/118 (0.00%)
# events	4	0
<b>Enteritis †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Gastric varices †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Gastritis †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	2	0
<b>Haemorrhoids †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Hernial eventration †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Inguinal hernia †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Intestinal obstruction †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Intestinal perforation †1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Mesenteric vein thrombosis †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Oesophagitis †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Rectal haemorrhage †1</b>		
# participants affected / at risk	2/232 (0.86%)	1/118 (0.85%)
# events	2	1
<b>Rectal perforation †1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)

# events	0	1
<b>Rectal stenosis † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Umbilical hernia † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Upper gastrointestinal haemorrhage † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Varices oesophageal † 1</b>		
# participants affected / at risk	2/232 (0.86%)	0/118 (0.00%)
# events	2	0
<b>General disorders</b>		
<b>Asthenia † 1</b>		
# participants affected / at risk	2/232 (0.86%)	1/118 (0.85%)
# events	2	1
<b>Chest pain † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Malaise † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Multi-organ failure † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Oedema peripheral † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Pyrexia † 1</b>		
# participants affected / at risk	3/232 (1.29%)	3/118 (2.54%)
# events	3	11
<b>Soft tissue inflammation † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Hepatobiliary disorders</b>		
<b>Cholangitis † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Gallbladder disorder † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Hepatitis † 1</b>		
# participants affected / at risk	2/232 (0.86%)	0/118 (0.00%)
# events	3	0

<b>Hepatitis toxic † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Portal hypertension † 1</b>		
# participants affected / at risk	2/232 (0.86%)	0/118 (0.00%)
# events	2	0
<b>Portal vein thrombosis † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Immune system disorders</b>		
<b>Drug hypersensitivity † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Hypersensitivity † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	2	0
<b>Infections and infestations</b>		
<b>Anogenital warts † 1</b>		
# participants affected / at risk	2/232 (0.86%)	0/118 (0.00%)
# events	2	0
<b>Appendicitis † 1</b>		
# participants affected / at risk	2/232 (0.86%)	0/118 (0.00%)
# events	2	0
<b>Bone tuberculosis † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Bronchopneumonia † 1</b>		
# participants affected / at risk	2/232 (0.86%)	0/118 (0.00%)
# events	2	0
<b>Candidiasis † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Carbuncle † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Cellulitis † 1</b>		
# participants affected / at risk	2/232 (0.86%)	0/118 (0.00%)
# events	2	0
<b>Choriomeningitis lymphocytic † 1</b>		
# participants affected / at risk	2/232 (0.86%)	0/118 (0.00%)
# events	2	0
<b>Cytomegalovirus chorioretinitis † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Cytomegalovirus colitis † 1</b>		

# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Cytomegalovirus hepatitis † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Cytomegalovirus infection † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Diarrhoea infectious † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Disseminated cytomegaloviral infection † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Dysentery † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>End stage AIDS † 1</b>		
# participants affected / at risk	1/232 (0.43%)	1/118 (0.85%)
# events	1	1
<b>Endophthalmitis † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	2	0
<b>Epidermodysplasia verruciformis † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Erythema infectiosum † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Fallopian tube abscess † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Gastroenteritis † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Gastroenteritis viral † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Genital herpes † 1</b>		
# participants affected / at risk	3/232 (1.29%)	0/118 (0.00%)
# events	3	0
<b>Giardiasis † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>HIV infection † 1</b>		

# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Influenza † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Leishmaniasis † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	4
<b>Lower respiratory tract infection † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Meningitis † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Meningitis cryptococcal † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Mycobacterial infection † 1</b>		
# participants affected / at risk	2/232 (0.86%)	0/118 (0.00%)
# events	2	0
<b>Mycobacterium avium complex infection † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Oesophageal candidiasis † 1</b>		
# participants affected / at risk	1/232 (0.43%)	3/118 (2.54%)
# events	1	3
<b>Oral candidiasis † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Pharyngitis † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Pneumocystis jiroveci pneumonia † 1</b>		
# participants affected / at risk	2/232 (0.86%)	0/118 (0.00%)
# events	2	0
<b>Pneumonia † 1</b>		
# participants affected / at risk	11/232 (4.74%)	5/118 (4.24%)
# events	11	6
<b>Pneumonia fungal † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Pneumonia pneumococcal † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Progressive multifocal leukoencephalopathy † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)

# events	0	1
<b>Pseudomonal sepsis † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Respiratory tract infection † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Sepsis † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Septic shock † 1</b>		
# participants affected / at risk	2/232 (0.86%)	1/118 (0.85%)
# events	3	2
<b>Sinusitis † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Staphylococcal bacteraemia † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Subcutaneous abscess † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Syphilis † 1</b>		
# participants affected / at risk	1/232 (0.43%)	1/118 (0.85%)
# events	1	1
<b>Tuberculosis of genitourinary system † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Urinary tract infection † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Urosepsis † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Varicella † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Visceral leishmaniasis † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Injury, poisoning and procedural complications</b>		
<b>Accidental overdose † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Fibula fracture † 1</b>		

# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Foot fracture †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Humerus fracture †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Incisional hernia †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Inflammation of wound †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Intentional overdose †<sup>1</sup></b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Jaw fracture †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Lower limb fracture †<sup>1</sup></b>		
# participants affected / at risk	2/232 (0.86%)	0/118 (0.00%)
# events	2	0
<b>Overdose †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	2/118 (1.69%)
# events	1	2
<b>Post procedural haematuria †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Skull fracture †<sup>1</sup></b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Spinal fracture †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Subdural haematoma †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Tendon rupture †<sup>1</sup></b>		
# participants affected / at risk	2/232 (0.86%)	0/118 (0.00%)
# events	2	0
<b>Thoracic vertebral fracture †<sup>1</sup></b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	3
<b>Tibia fracture †<sup>1</sup></b>		

<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Toxicity to various agents †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Wrist fracture †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Investigations</b>		
<b>Alanine aminotransferase increased †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>2/232 (0.86%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>2</b>	<b>0</b>
<b>Aspartate aminotransferase increased †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>2/232 (0.86%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>2</b>	<b>0</b>
<b>Blood potassium decreased †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Neutrophil count decreased †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>3</b>	<b>0</b>
<b>Weight decreased †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Metabolism and nutrition disorders</b>		
<b>Diabetes mellitus †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>1/118 (0.85%)</b>
<b># events</b>	<b>2</b>	<b>1</b>
<b>Diabetic complication †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Diabetic foot †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>2</b>	<b>0</b>
<b>Hypoglycaemia †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>0/232 (0.00%)</b>	<b>1/118 (0.85%)</b>
<b># events</b>	<b>0</b>	<b>1</b>
<b>Malnutrition †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>0/232 (0.00%)</b>	<b>1/118 (0.85%)</b>
<b># events</b>	<b>0</b>	<b>1</b>
<b>Metabolic acidosis †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>1/232 (0.43%)</b>	<b>0/118 (0.00%)</b>
<b># events</b>	<b>1</b>	<b>0</b>
<b>Obesity †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>0/232 (0.00%)</b>	<b>1/118 (0.85%)</b>

# events	0	1
<b>Musculoskeletal and connective tissue disorders</b>		
<b>Intervertebral disc protrusion †1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Muscular weakness †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Musculoskeletal pain †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Osteonecrosis †1</b>		
# participants affected / at risk	3/232 (1.29%)	0/118 (0.00%)
# events	3	0
<b>Osteoporotic fracture †1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Neoplasms benign, malignant and unspecified (incl cysts and polyps)</b>		
<b>Anal cancer †1</b>		
# participants affected / at risk	3/232 (1.29%)	1/118 (0.85%)
# events	3	1
<b>B-cell lymphoma †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Basal cell carcinoma †1</b>		
# participants affected / at risk	5/232 (2.16%)	3/118 (2.54%)
# events	8	3
<b>Bowen's disease †1</b>		
# participants affected / at risk	2/232 (0.86%)	0/118 (0.00%)
# events	2	0
<b>Colon cancer †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Colon cancer metastatic †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Colorectal cancer †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Colorectal cancer metastatic †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Colorectal cancer recurrent †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)

# events	1	0
<b>Diffuse large B-cell lymphoma † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Hodgkin's disease † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Kaposi's sarcoma AIDS related † 1</b>		
# participants affected / at risk	4/232 (1.72%)	0/118 (0.00%)
# events	4	0
<b>Lip neoplasm malignant stage unspecified † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Lung neoplasm malignant † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Lymphoma † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Non-Hodgkin's lymphoma † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Oral neoplasm † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Rectal cancer † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Skin cancer † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Squamous cell carcinoma † 1</b>		
# participants affected / at risk	2/232 (0.86%)	3/118 (2.54%)
# events	5	5
<b>Squamous cell carcinoma of skin † 1</b>		
# participants affected / at risk	2/232 (0.86%)	0/118 (0.00%)
# events	2	0
<b>T-cell lymphoma † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Tongue neoplasm malignant stage unspecified † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Vulval cancer stage 0 † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1

<b>Nervous system disorders</b>		
<b>Cerebral haemorrhage †1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Cerebral infarction †1</b>		
# participants affected / at risk	1/232 (0.43%)	1/118 (0.85%)
# events	1	1
<b>Cerebral ischaemia †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Cerebrovascular accident †1</b>		
# participants affected / at risk	2/232 (0.86%)	1/118 (0.85%)
# events	3	1
<b>Convulsion †1</b>		
# participants affected / at risk	1/232 (0.43%)	2/118 (1.69%)
# events	1	3
<b>Encephalitis †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Epilepsy †1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	4
<b>Hydrocephalus †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Hypoaesthesia †1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Ischaemic stroke †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Parkinsonism †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Poor quality sleep †1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Psychomotor hyperactivity †1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Syncope †1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Psychiatric disorders</b>		
†1		

<b>Depression</b>		
# participants affected / at risk	0/232 (0.00%)	2/118 (1.69%)
# events	0	3
<b>Disturbance in social behaviour † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Panic attack † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Psychotic disorder † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Substance abuse † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Suicide attempt † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Renal and urinary disorders</b>		
<b>Calculus urinary † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Focal segmental glomerulosclerosis † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Nephrolithiasis † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Nephropathy † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Nephropathy toxic † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Nephrotic syndrome † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Proteinuria † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Renal failure † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Renal failure acute † 1</b>		
# participants affected / at risk	2/232 (0.86%)	0/118 (0.00%)

# events	2	0
<b>Renal tubular necrosis †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Reproductive system and breast disorders</b>		
<b>Benign prostatic hyperplasia †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Epididymal cyst †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Epididymitis †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Gynaecomastia †<sup>1</sup></b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Oedema genital †<sup>1</sup></b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Ovarian necrosis †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Prostatitis †<sup>1</sup></b>		
# participants affected / at risk	2/232 (0.86%)	1/118 (0.85%)
# events	2	1
<b>Uterine prolapse †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Respiratory, thoracic and mediastinal disorders</b>		
<b>Dyspnoea †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Haemoptysis †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Hiccups †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Lung disorder †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	1/118 (0.85%)
# events	1	1
<b>Pneumonia aspiration †<sup>1</sup></b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0

<b>Pneumothorax † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Pulmonary embolism † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Pulmonary hypertension † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Respiratory distress † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Skin and subcutaneous tissue disorders</b>		
<b>Hidradenitis † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	3
<b>Rash † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Vascular disorders</b>		
<b>Deep vein thrombosis † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Hypotension † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Hypovolaemic shock † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Shock † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0
<b>Varicophlebitis † 1</b>		
# participants affected / at risk	0/232 (0.00%)	1/118 (0.85%)
# events	0	1
<b>Venous thrombosis † 1</b>		
# participants affected / at risk	1/232 (0.43%)	0/118 (0.00%)
# events	1	0

† Events were collected by systematic assessment

1 Term from vocabulary, MedDRA 14.0

## Other Adverse Events

 Hide Other Adverse Events

<b>Time Frame</b>	240 Weeks
<b>Additional Description</b>	Adverse events are reported by original treatment group for the entire 240-week study, including double-blind, open-label, and OLPVF phases; 94 of 118 participants in the placebo group also received raltegravir in the open-label or OLPVF phase.

#### Frequency Threshold

<b>Threshold above which other adverse events are reported</b>	5%
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#### Reporting Groups

	Description
<b>Raltegravir 400 mg b.i.d Plus OBT</b>	Includes all participants initially randomized to raltegravir, including those without virologic failure who continued into the open-label phase at Week 156 and those who entered the OLPVF phase due to virologic failure. During either open-label phase up to Week 240, these participants continued to receive raltegravir 400 mg b.i.d. plus OBT.
<b>Placebo Plus OBT</b>	Includes all participants initially randomized to placebo, including those without virologic failure who continued into the open-label phase at Week 156 and those who entered the OLPVF phase due to virologic failure. During either open-label phase up to Week 240, these participants continued to receive raltegravir 400 mg b.i.d. plus OBT.

#### Other Adverse Events

	Raltegravir 400 mg b.i.d Plus OBT	Placebo Plus OBT
<b>Total, other (not including serious) adverse events</b>		
<b># participants affected / at risk</b>	<b>206/232 (88.79%)</b>	<b>104/118 (88.14%)</b>
<b>Blood and lymphatic system disorders</b>		
<b>Anaemia † 1</b>		
<b># participants affected / at risk</b>	<b>9/232 (3.88%)</b>	<b>7/118 (5.93%)</b>
<b># events</b>	<b>12</b>	<b>13</b>
<b>Lymphadenopathy † 1</b>		
<b># participants affected / at risk</b>	<b>19/232 (8.19%)</b>	<b>5/118 (4.24%)</b>
<b># events</b>	<b>19</b>	<b>8</b>
<b>Gastrointestinal disorders</b>		
<b>Abdominal pain † 1</b>		
<b># participants affected / at risk</b>	<b>15/232 (6.47%)</b>	<b>11/118 (9.32%)</b>
<b># events</b>	<b>16</b>	<b>12</b>
<b>Diarrhoea † 1</b>		
<b># participants affected / at risk</b>	<b>74/232 (31.90%)</b>	<b>34/118 (28.81%)</b>
<b># events</b>	<b>110</b>	<b>70</b>
<b>Gastritis † 1</b>		
<b># participants affected / at risk</b>	<b>8/232 (3.45%)</b>	<b>7/118 (5.93%)</b>
<b># events</b>	<b>8</b>	<b>8</b>
<b>Haemorrhoids † 1</b>		
<b># participants affected / at risk</b>	<b>12/232 (5.17%)</b>	<b>2/118 (1.69%)</b>
<b># events</b>	<b>12</b>	<b>2</b>
<b>Nausea † 1</b>		

<b># participants affected / at risk</b>	<b>30/232 (12.93%)</b>	<b>20/118 (16.95%)</b>
<b># events</b>	<b>38</b>	<b>25</b>
<b>Vomiting †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>18/232 (7.76%)</b>	<b>17/118 (14.41%)</b>
<b># events</b>	<b>26</b>	<b>25</b>
<b>General disorders</b>		
<b>Asthenia †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>15/232 (6.47%)</b>	<b>11/118 (9.32%)</b>
<b># events</b>	<b>16</b>	<b>11</b>
<b>Fatigue †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>18/232 (7.76%)</b>	<b>6/118 (5.08%)</b>
<b># events</b>	<b>18</b>	<b>9</b>
<b>Injection site reaction †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>18/232 (7.76%)</b>	<b>14/118 (11.86%)</b>
<b># events</b>	<b>19</b>	<b>16</b>
<b>Pyrexia †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>28/232 (12.07%)</b>	<b>18/118 (15.25%)</b>
<b># events</b>	<b>35</b>	<b>23</b>
<b>Infections and infestations</b>		
<b>Anogenital warts †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>11/232 (4.74%)</b>	<b>6/118 (5.08%)</b>
<b># events</b>	<b>14</b>	<b>7</b>
<b>Bronchitis †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>42/232 (18.10%)</b>	<b>16/118 (13.56%)</b>
<b># events</b>	<b>71</b>	<b>23</b>
<b>Gastroenteritis †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>22/232 (9.48%)</b>	<b>3/118 (2.54%)</b>
<b># events</b>	<b>28</b>	<b>4</b>
<b>Genital herpes †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>10/232 (4.31%)</b>	<b>9/118 (7.63%)</b>
<b># events</b>	<b>11</b>	<b>12</b>
<b>Herpes simplex †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>12/232 (5.17%)</b>	<b>3/118 (2.54%)</b>
<b># events</b>	<b>13</b>	<b>6</b>
<b>Herpes zoster †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>20/232 (8.62%)</b>	<b>7/118 (5.93%)</b>
<b># events</b>	<b>23</b>	<b>10</b>
<b>Influenza †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>25/232 (10.78%)</b>	<b>8/118 (6.78%)</b>
<b># events</b>	<b>28</b>	<b>11</b>
<b>Nasopharyngitis †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>58/232 (25.00%)</b>	<b>21/118 (17.80%)</b>
<b># events</b>	<b>96</b>	<b>51</b>
<b>Oral candidiasis †<sup>1</sup></b>		
<b># participants affected / at risk</b>	<b>11/232 (4.74%)</b>	<b>15/118 (12.71%)</b>

# events	14	20
<b>Pharyngitis † 1</b>		
# participants affected / at risk	15/232 (6.47%)	8/118 (6.78%)
# events	24	11
<b>Pneumonia † 1</b>		
# participants affected / at risk	9/232 (3.88%)	9/118 (7.63%)
# events	12	11
<b>Respiratory tract infection † 1</b>		
# participants affected / at risk	19/232 (8.19%)	3/118 (2.54%)
# events	21	5
<b>Sinusitis † 1</b>		
# participants affected / at risk	11/232 (4.74%)	6/118 (5.08%)
# events	15	13
<b>Upper respiratory tract infection † 1</b>		
# participants affected / at risk	20/232 (8.62%)	7/118 (5.93%)
# events	35	15
<b>Urinary tract infection † 1</b>		
# participants affected / at risk	14/232 (6.03%)	6/118 (5.08%)
# events	17	8
<b>Investigations</b>		
<b>Alanine aminotransferase increased † 1</b>		
# participants affected / at risk	24/232 (10.34%)	9/118 (7.63%)
# events	40	19
<b>Aspartate aminotransferase increased † 1</b>		
# participants affected / at risk	24/232 (10.34%)	8/118 (6.78%)
# events	30	18
<b>Blood cholesterol increased † 1</b>		
# participants affected / at risk	28/232 (12.07%)	9/118 (7.63%)
# events	44	20
<b>Blood triglycerides increased † 1</b>		
# participants affected / at risk	22/232 (9.48%)	11/118 (9.32%)
# events	30	14
<b>Weight decreased † 1</b>		
# participants affected / at risk	6/232 (2.59%)	7/118 (5.93%)
# events	8	7
<b>Metabolism and nutrition disorders</b>		
<b>Decreased appetite † 1</b>		
# participants affected / at risk	12/232 (5.17%)	6/118 (5.08%)
# events	13	6
<b>Diabetes mellitus † 1</b>		
# participants affected / at risk	6/232 (2.59%)	6/118 (5.08%)
# events	7	6
<b>Musculoskeletal and connective tissue disorders</b>		
<b>Arthralgia † 1</b>		
# participants affected / at risk	14/232 (6.03%)	7/118 (5.93%)

# events	15	8
<b>Back pain † 1</b>		
# participants affected / at risk	26/232 (11.21%)	10/118 (8.47%)
# events	33	14
<b>Muscle spasms † 1</b>		
# participants affected / at risk	12/232 (5.17%)	7/118 (5.93%)
# events	15	7
<b>Myalgia † 1</b>		
# participants affected / at risk	9/232 (3.88%)	8/118 (6.78%)
# events	9	9
<b>Pain in extremity † 1</b>		
# participants affected / at risk	12/232 (5.17%)	6/118 (5.08%)
# events	16	6
<b>Neoplasms benign, malignant and unspecified (incl cysts and polyps)</b>		
<b>Skin papilloma † 1</b>		
# participants affected / at risk	16/232 (6.90%)	6/118 (5.08%)
# events	20	8
<b>Nervous system disorders</b>		
<b>Dizziness † 1</b>		
# participants affected / at risk	14/232 (6.03%)	2/118 (1.69%)
# events	15	2
<b>Headache † 1</b>		
# participants affected / at risk	28/232 (12.07%)	24/118 (20.34%)
# events	38	29
<b>Psychiatric disorders</b>		
<b>Depression † 1</b>		
# participants affected / at risk	13/232 (5.60%)	9/118 (7.63%)
# events	14	10
<b>Insomnia † 1</b>		
# participants affected / at risk	24/232 (10.34%)	12/118 (10.17%)
# events	24	14
<b>Respiratory, thoracic and mediastinal disorders</b>		
<b>Cough † 1</b>		
# participants affected / at risk	20/232 (8.62%)	11/118 (9.32%)
# events	24	14
<b>Skin and subcutaneous tissue disorders</b>		
<b>Eczema † 1</b>		
# participants affected / at risk	6/232 (2.59%)	7/118 (5.93%)
# events	7	7
<b>Lipodystrophy acquired † 1</b>		
# participants affected / at risk	11/232 (4.74%)	6/118 (5.08%)
# events	11	6
<b>Pruritus † 1</b>		

# participants affected / at risk	16/232 (6.90%)	6/118 (5.08%)
# events	20	6
Rash † <sup>1</sup>		
# participants affected / at risk	20/232 (8.62%)	7/118 (5.93%)
# events	25	12
Vascular disorders		
Hypertension † <sup>1</sup>		
# participants affected / at risk	32/232 (13.79%)	12/118 (10.17%)
# events	32	12

† Events were collected by systematic assessment

<sup>1</sup> Term from vocabulary, MedDRA 14.0

## ▶ Limitations and Caveats

☰ Hide Limitations and Caveats

Limitations of the study, such as early termination leading to small numbers of participants analyzed and technical problems with measurement leading to unreliable or uninterpretable data

Adverse events are reported by original treatment group for the entire 240-week study, including double-blind, open-label, and OLPVF phases; 94 of 118 participants in the placebo group also received raltegravir in the open-label or OLPVF phase.

## ▶ More Information

☰ Hide More Information

### Certain Agreements:

Principal Investigators are **NOT** employed by the organization sponsoring the study.

There **IS** an agreement between Principal Investigators and the Sponsor (or its agents) that restricts the PI's rights to discuss or publish trial results after the trial is completed.

The agreement is:

The only disclosure restriction on the PI is that the sponsor can review results communications prior to public release and can embargo communications regarding trial results for a period that is **less than or equal to 60 days**. The sponsor cannot require changes to the communication and cannot extend the embargo.

The only disclosure restriction on the PI is that the sponsor can review results communications prior to public release and can embargo communications regarding trial results for a period that is **more than 60 days but less than or equal to 180 days**. The sponsor cannot require changes to the communication and cannot extend the embargo.

Other disclosure agreement that restricts the right of the PI to discuss or publish trial results after the trial is completed.

**Restriction Description:** Merck agreements may vary with individual investigators, but will not prohibit any investigator from publishing. Merck supports the publication of results from all centers of a multi-center trial but requests that reports based on single-site data not precede the primary publication of the entire clinical trial.

### Results Point of Contact:

Name/Title: Senior Vice President, Global Clinical Development

Organization: Merck Sharp & Dohme Corp

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e-mail: [ClinicalTrialsDisclosure@merck.com](mailto:ClinicalTrialsDisclosure@merck.com)

### Publications of Results:

Steigbigel RT, Cooper DA, Tepler H, Eron JJ, Gatell JM, Kumar PN, Rockstroh JK, Schechter M, Katlama C, Markowitz M, Yeni P, Loutfy MR, Lazzarin A, Lennox JL, Clotet B, Zhao J, Wan H, Rhodes RR, Strohmaier KM, Barnard RJ, Isaacs RD, Nguyen BY; BENCHMRK Study Teams. Long-term efficacy and safety of Raltegravir combined with optimized background therapy in treatment-experienced patients with drug-resistant HIV infection: week 96 results of the BENCHMRK 1 and 2 Phase III trials. *Clin Infect Dis*. 2010 Feb 15;50(4):605-12. doi: 10.1086/650002.

**Other Publications:**

Steigbigel RT, Cooper DA, Kumar PN, Eron JE, Schechter M, Markowitz M, Loutfy MR, Lennox JL, Gatell JM, Rockstroh JK, Katlama C, Yeni P, Lazzarin A, Clotet B, Zhao J, Chen J, Ryan DM, Rhodes RR, Killar JA, Gilde LR, Strohmaier KM, Meibohm AR, Miller MD, Hazuda DJ, Nessly ML, DiNubile MJ, Isaacs RD, Nguyen BY, Tepler H; BENCHMRK Study Teams. Raltegravir with optimized background therapy for resistant HIV-1 infection. *N Engl J Med*. 2008 Jul 24;359(4):339-54. doi: 10.1056/NEJMoa0708975.

Cooper DA, Steigbigel RT, Gatell JM, Rockstroh JK, Katlama C, Yeni P, Lazzarin A, Clotet B, Kumar PN, Eron JE, Schechter M, Markowitz M, Loutfy MR, Lennox JL, Zhao J, Chen J, Ryan DM, Rhodes RR, Killar JA, Gilde LR, Strohmaier KM, Meibohm AR, Miller MD, Hazuda DJ, Nessly ML, DiNubile MJ, Isaacs RD, Tepler H, Nguyen BY; BENCHMRK Study Teams. Subgroup and resistance analyses of raltegravir for resistant HIV-1 infection. *N Engl J Med*. 2008 Jul 24;359(4):355-65. doi: 10.1056/NEJMoa0708978.

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