Proportion with HIV RNA below the LLQ (intent-to-treat [noncompleter=failure]) (ITT NC=F) at each visit: Patients who discontinued prior to the visit

- Antiretroviral-naïve patients.

Based on the ITT NC=F analysis, 76% of patients had HIV RNA <50 copies/mL at Week 144 (on-treatment analysis: 96%) (Figure 3).

- Median CD4 count: 326 cells/mm$^3$ (range 3-918).

**Baseline Characteristics**

- At baseline in study M97-720, 79/100 (79%), 65/100 (65%) and 37/100 (37%) patients met the above IAS, DHHS and BHIVA criteria recommending ARV therapy initiation, respectively. Virologic and immunologic response among these patients (Figures 6 and 7) compare favorably to results from all patients reported above.

**CD4 Cell Count Responses**

- Among patients with values at Week 156 and Week 156, the mean CD4 count increased from 308 cells/mm$^3$ to 484 cells/mm$^3$, an increase of 176 cells/mm$^3$ (Figure 8). - CD4 cell count responses appeared to be consistent across comparisons of baseline CD4 cell count. Among patients with baseline CD4 count <200 cells/mm$^3$ and CD4 count ≥200 cells/mm$^3$, the mean CD4 count increased by 176 cells/mm$^3$ and 100 cells/mm$^3$, respectively, an increase of 176 cells/mm$^3$.

**Vinocologic and Immunologic Response with Respect to Current HIV Treatment Guidelines**

- In July 2001, the British HIV Association (BHIVA) issued guidelines recommending initiation of ARV therapy in therapy-naive HIV-infected patients with CD4 cell count <200 cells/mm$^3$ or viral load above 55,000 copies/mL by RT/PCR.

- In February 2001, the Department of Health and Human Services (DHHS) issued updated guidelines for the use of ARV therapy in adults and adolescents, recommending initiation of ARV therapy in therapy-naive HIV-infected patients with CD4 cell count <200 cells/mm$^3$ or viral load ≥100,000 copies/mL as measured by RT/PCR.

- The BHIVA guidelines also list LPV/r as an option for initial treatment of HIV infection. LPV/r has been studied in both antiretroviral-naive and -experienced HIV-infected patients. However, few large data sets are available on combined safety and efficacy. The M97-720 study is an ongoing phase II study evaluating LPV/r in combination with other ARV drugs in antiretroviral-naive patients with CD4 cell count ≥350 cells/mm$^3$ and virus load ≥100,000 copies/mL. This poster presents data on safety and efficacy through 156 weeks.

**Duration of Virologic Response Analysis**

- 8/15 patients (53%) who experienced loss of virologic response through Week 156 demonstrated resuppression of HIV RNA levels to <400 copies/mL.