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TITLE

PHARMACOKINETIC CHARACTERISTICS OF VARIOUS DOSES OF VAGINAL PROGESTERONE PESSARIES IN COMPARISON TO PROGESTERONE VAGINAL GEL

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ABSTRACT

Context: The optimal dose and efficacy of progesterone vaginal pessaries have yet to be determined when used for luteal phase support in assisted reproduction

Objective: Assess and compare pharmacokinetics (PK) of progesterone vaginal pessaries to progesterone vaginal gel

Methods: Randomized Phase 1 study

Patients: 125 healthy female volunteers, 18-45 years old

Interventions: Progesterone vaginal pessaries (Cyclogest®) 100mg twice daily (BID), 200mg BID, 400mg daily (OD) or BID or progesterone vaginal gel 90mg (Crinone®) OD

Outcome Measure(s): PK parameters, assessed after first dose on Day 15 (single dose, SD) and last dose on Day 24 (multiple dose, MD). Parameters assessed: area under the concentration-time curve (AUC_{0-12h}; AUC_{0-24h}; AUC_{0-tlast,MD}), maximum observed plasma concentration (C_{max,SD};C_{max,MD}), time to C_{max} (T_{max,SD};T_{max,MD}) and terminal phase half-life (t_{1/2,MD}).

Result(s): SD PK characteristics were comparable over the 12 hour sampling interval for 200 mg and 400 mg Cyclogest®. A dose-dependent effect on PK was observed only up to 200 mg after SD. The 100 mg Cyclogest® dose showed slightly larger AUC(0-12h) and C_{max,SD} than 90 mg Crinone® but earlier T_{max,SD}. After MD, mean plasma progesterone concentrations of Cyclogest® 400 mg BID, 400 mg OD and 200 mg BID consistently exceeded those of Crinone® during the 24 hours dosing interval. A dose-dependent but not dose-proportional effect on progesterone PK could clearly be observed after MD with Cyclogest®. Both C_{max,MD} and AUC(0-24h) were at least doubled after administration of Cyclogest® 400 mg BID in comparison to Crinone. Both Cyclogest® and Crinone® were safe and well tolerated.

Conclusions: PK of progesterone vaginal pessaries showed a dose-dependent but not dose-proportional increase of plasma progesterone levels.

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INSTITUTE

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