

## Effects of Clarithromycin on the Pharmacokinetics of Zolpidem

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Zolpidem, an imidazopyridine derivate, is widely prescribed for the short-term treatment of insomnia. Zolpidem is extensively metabolized to three inactive metabolites by CYP3A4, and to a lesser extent CYP2C9, CYP2C19 and CYP2C1A2. However, there is no report on the drug-drug interaction between zolpidem and clarithromycin, a strong inhibitor of CYP3A4. Our objective was to evaluate a possible pharmacokinetic interaction between zolpidem and clarithromycin, an inhibitor of CYP3A4, in twenty-seven healthy Korean volunteers. The study consisted of two periods: Period 1 (control phase), when each volunteer received a single dose of 5 mg zolpidem and Period 2 (clarithromycin phase), when each volunteer received a single dose of 5 mg zolpidem and 500 mg clarithromycin. Between the two periods, the subjects were treated for 5 days with a dose of 500 mg ciprofloxacin twice a day. Plasma concentrations of zolpidem were determined during a 12-hour period following drug administration. Pharmacokinetic parameters of zolpidem administered in each treatment period were calculated using non-compartmental analysis and the data from two periods were compared to determine statistically significant differences. In the two periods of treatments, the  $C_{max}$  were  $51.4 \pm 14.6$  ng/ml (zolpidem alone) and  $55.6 \pm 15.2$  ng/ml (zolpidem after pre-treatment with clarithromycin). The total areas under the curve ( $AUC_{inf}$ ) were  $185.1 \pm 64.0$  and  $297.5 \pm 107.0$  ng h/ml, respectively. Apparent oral clearance ( $CL/F$ ) of zolpidem was 35.5% lower ( $0.031 \pm 0.014$  L/hr vs  $0.020 \pm 0.013$  L/hr) in the clarithromycin phase compared to the control phase ( $P < 0.001$ ).  $t_{max}$  and  $t_{1/2}$  of zolpidem were significantly increased in the clarithromycin phase ( $0.6 \pm 0.2$  hr and  $2.6 \pm 0.6$  hr, respectively) than those ( $1.2 \pm 0.8$  hr and  $3.4 \pm 1.0$  hr, respectively) in the control phase ( $P < 0.001$ ). These results showed that coadministration of clarithromycin caused an increase in the plasma exposure of zolpidem. This magnitude of effect is likely to be clinically significant.

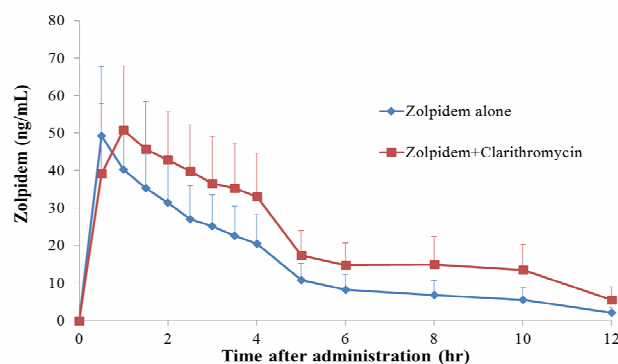


Figure 1. Time-concentration profile of zolpidem after a single dose of 5 mg zolpidem.