CHAPTER 6

CONCLUSION

The effect of vitamin C on ketoconazole absorption in AIDS patients was partitioned into two groups according to the patients' illness. In the stable illness group, patient had no active opportunistic infection and almost of them took only cotrimoxazole for PCP prophylaxis, was found significant extent of ketoconazole absorption in the presence of vitamin C, meanwhile the progressive illness group was not showed significant difference. The $\text{AUC}_{0-\alpha}$ (mean ± SD) values were 9.12 ± 8.16 and 14.88 ± 7.02 μg.h/ml when patient with stable illness took ketoconazole alone and with 1.5-g of vitamin C, respectively ($p = 0.029$). $C_{\text{max}}$ was also significantly increased in this group when concomitant treatment with vitamin C ($p = 0.007$). However, $T_{\text{max}}$ and elimination half-life did not differ significantly. Therefore, vitamin C increased the extent of ketoconazole absorption in AIDS patients with stable illness. Whereas the patients with active opportunistic infection and took many medication could not perform the data of increased absorption.

Administration of ketoconazole and vitamin C for enhanced ketoconazole absorption is recommended for superficial fungal infection in AIDS patient who had stable illness prior switching to an alternative agent in the case of treatment failure. The clinical efficacy of ketoconazole plus vitamin C and the new preparation development to enhance ketoconazole absorption require further investigation.