

ABBREVIATED ANTIRETROVIRAL TABLE FOR HIV TREATMENT:

ADULT DOSING, ADVERSE REACTIONS and INTERACTION POTENTIAL FOR COMMONLY USED MEDICATIONS

Generic Name Abbreviation (Brand Name)	Dosage Forms* (Generics, Liquids, Alternate Forms)	Adult Dosing**	Adverse Reactions	Interaction Potential (Partial List; Check Other Resources for Complete Information)
N(t)RTI Co-formulations			Hepatotoxicity, Mitochondrial Toxicity, Lactic Acidosis	
Abacavir/Lamivudine ABC/3TC	Generic tablets: 600mg ABC/300mg 3TC	One tablet (600/300mg) once daily No food restrictions	ABC: N, V, HSR: fever, malaise, GI s/sx, R; do not re-challenge Check HLA-B*5701 to avoid ABC hypersensitivity reaction 3TC: HA, N, V	Minimal
Tenofovir DF/Emtricitabine TDF/FTC (Truvada)	Tablet: 300mg TDF/200mg FTC Generic tablets available	One tablet (300/200mg) once daily No food restrictions	TDF: N, V, flatulence, renal toxicity, ↓ bone mineral density FTC: HA, N, V	Minimal
Tenofovir AF/Emtricitabine TAF/FTC (Descovy) (TAF= tenofovir alafenamide)	Tablet: 25mg TAF/200mg FTC	One tablet (25/200mg) once daily No food restrictions	TAF: N, ↑LDL/total cholesterol FTC: see above	Avoid strong inducers
Tenofovir DF/Lamivudine TDF/3TC (Cimduo)	Tablet: 300mg TDF/300mg 3TC	One tablet (300/300mg) once daily No food restrictions	See TDF & 3TC above	Minimal
NON-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS (NNRTIs)			Rash, Hepatotoxicity	
Rilpivirine RPV (Edurant (oral); long-acting injectable RPV is a component of Cabenuva†) †Cabenuva = RPV IM co-packaged with cabotegravir (CAB) IM	Tablet: 25mg Suspension for IM injection: 900mg/3mL, 600mg/2mL	25mg tablet once daily Take with normal to high calorie meal LONG-ACTING INJECTABLE 900mg IM x 1, then after one month 600mg IM once monthly <i>or</i> 900mg IM x 2 (separated by one month), followed by 900mg IM every 2 months NOTE—all RPV IM doses are given with co-packaged CAB IM (see CAB dosing below) <i>OPTIONAL oral lead-in may precede injections with:</i> - RPV 25mg daily (with CAB 30mg daily) x 1 month	CNS: depressive disorders, HA, insomnia; rash, increased cholesterol, hepatotoxicity Avoid oral RPV as initial treatment if viral load > 100k copies/mL	Substrate of CYP3A4; contraindicated with strong CYP3A inducers. Oral RPV contraindicated with proton pump inhibitors.
Doravirine DOR (Pifeltro)	Tablet: 100mg	100mg once daily No food restrictions	N, D, HA, dizziness	Substrate of CYP3A4; contraindicated with strong CYP 3A4 inducers (e.g. rifampin, certain anticonvulsants).

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NRTI Pair plus NNRTI Co-formulations				
Efavirenz/ Emtricitabine/Tenofovir DF EFV/FTC/TDF	Tablet: 600mg EFV/200mg FTC/300mg TDF (generic)	One tablet once daily Preferably empty stomach, at bedtime	N, D, HA, CNS effects	EFV: inducer, inhibitor, and substrate of liver enzymes See FTC, TDF
Efavirenz/Tenofovir DF/Lamivudine EFV/TDF/3TC (Symfi, Symfi Lo)	Tablet: 600mg EFV/300mg TDF/300mg 3TC (Symfi and generic), 400mg EFV/300mg TDF/300mg 3TC (Symfi Lo and generic)	One tablet once daily Preferably empty stomach, at bedtime	See EFV, TDF, 3TC	See EFV, TDF, 3TC
Rilpivirine/Emtricitabine/Tenofovir DF RPV/FTC/TDF (Complera)	Tablet: 25mg RPV/200mg FTC/300mg TDF (brand and generic)	One tablet once daily Take with a full meal	See RPV, FTC, TDF	See RPV, FTC, TDF
Rilpivirine/ Emtricitabine/Tenofovir AF RPV/FTC/TAF (Odefsey) (TAF= tenofovir alafenamide)	Tablet: 25mg RPV/200mg FTC/25mg TAF	One tablet once daily Take with a full meal	See RPV, TAF/FTC	See RPV, TAF/FTC
Doravirine/Lamivudine/Tenofovir DF (DOR/3TC/TDF) (Delstrigo)	Tablet: 100mg DOR/300mg 3TC/300mg TDF	One tablet once daily No food restrictions	See DOR, 3TC, TDF	See DOR, 3TC, TDF
INTEGRASE STRAND TRANSFER INHIBITORS (INSTIs)				
Dolutegravir DTG (Tivicay)	Tablet: 50mg	50mg once daily (TN or TE but INSTI-naïve) or 50mg twice a day (INSTI-experienced or with certain UGT1A/CYP3A inducers) No food restrictions	HA, insomnia, increased LFTs	Strong inducers of UGT1A or CYP3A can decrease DTG levels; metformin; divalent/polyvalent cations; see package insert for dose adjustments or contraindicated combinations.
Cabotegravir CAB (Vocabria (oral); long-acting injectable CAB is a component of Cabenuva [†]) [†] Cabenuva = CAB IM co-packaged with RPV IM	Tablet: 30mg Suspension for IM injection: 600 mg/3mL, 400mg/2mL	600mg IM x1 initiation dose, then after one month 400mg IM once monthly or 600mg IM x 2 (separated by one month), followed by 600mg IM every 2 months NOTE—all CAB IM doses are given with co-packaged RPV IM (see RPV dosing above) <i>OPTIONAL oral lead-in may precede injections with:</i> - CAB 30mg daily (with RPV 25mg daily) x 1 month	Injection site reactions, fever, fatigue, HA, increased creatine kinase	CAB is UGT1A1 substrate Contraindicated with many anticonvulsants, rifamycins Give antacids with polyvalent cations at least 2 hours before or 4 hours after taking oral CAB.

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NRTI + INTEGRASE STRAND TRANSFER INHIBITORS (INSTI) Co-formulations				
Elvitegravir (EVG)/cobicistat/FTC/TAF (Genvoya) (TAF= tenofovir alafenamide)	Tablet: 150mg EVG/150mg cobicistat/ 200mg FTC/10mg TAF	One tablet once daily Take with food	N, D, HA	Strong 3A4 inducers can decrease EVG Cobi is a CYP3A inhibitor, which ↑ EVG exposure; may ↑ exposure to other CYP3A substrates. Contraindicated with rifampin, lovastatin, simvastatin, sildenafil dosed as Revatio® for PAH
Dolutegravir (DTG)/ABC/3TC (Triumeq)	Tablet: 50mg DTG/600mg ABC/300mg 3TC	One tablet once daily No food restrictions	See DTG, ABC, 3TC Must establish HLA -B*5701 status (to screen for ABC hypersensitivity)	Strong inducers of UGT1A or CYP3A can decrease DTG levels; metformin; divalent/polyvalent cations; see package insert for dose adjustments or contraindicated combinations.
Dolutegravir (DTG)/Lamivudine (3TC) (Dovato)	Tablet: 50mg DTG/300mg 3TC	One tablet once daily No food restrictions	See DTG, 3TC Not a complete HBV treatment regimen for HIV-HBV co-infection; not recommended as initial treatment if viral load > 500k copies/mL.	Strong inducers of UGT1A or CYP3A can decrease DTG levels; metformin; divalent/polyvalent cations; see package insert for dose adjustments or contraindicated combinations.
Bictegravir (BIC)/TAF/FTC (Biktarvy)	Tablet: 50mg BIC/200mg FTC/25mg TAF	One tablet once daily No food restrictions	N, D, HA	Strong inducers of UGT1A or CYP3A can decrease BIC levels; metformin; divalent/polyvalent cations; see package insert for dose adjustments or contraindicated combinations.
NNRTI + INSTI Co-formulation				
Dolutegravir (DTG)/Rilpivirine (RPV) (Juluca)	Tablet: 50mg DTG/25mg RPV	One tablet once daily Take with a full meal	See DTG, RPV	See DTG, RPV
PROTEASE INHIBITORS (PIs), including co-formulations			Hepatotoxicity, Lipodystrophy, Dyslipidemia, Insulin Resistance/Hyperglycemia	
Darunavir DRV (Prezista) DRV/cobi (Prezcobix) (cobi=cobicistat) DRV/cobi/TAF/FTC (Symtuza)	Tablets: 600mg, 800mg (brand and generic) Oral suspension: 100mg/mL Prezcobix tablet: 800mg DRV co-formulated with cobicistat 150mg Symtuza tablet: 800mg DRV/150mg cobicistat/200mg FTC/10mg TAF	- TN or TE with no DRV mutations: 800mg + [RTV 100mg once daily <u>or</u> cobi 150mg once daily] <u>or</u> DRV/cobi one tablet once daily <u>or</u> TE with ≥ 1 DRV mutations: 600mg + RTV 100mg twice a day Take with food	N, D, R, HA	Inhibitor of CYP3A

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Ritonavir RTV (Norvir)	Tablet: 100mg (brand and generic) Oral powder: 100mg per packet	• Given 100-200mg once or twice a day to boost Pls Take with food	N, V, D	Significant drug interactions Inhibitor of CYP3A and 2D6 inducer p-glycoprotein
ENTRY INHIBITORS (Fusion Inhibitors, CCR5 Co-receptor Antagonists, Post-attachment Inhibitors, Attachment Inhibitors)				
Fostemsavir FTR (Rukobia)	Tablets: 600mg	• 600mg twice a day No food restrictions	N, D, HA, ↑serum creatinine	CYP3A4 and P-gp substrate, inhibits (OAT)1B1/3 Caution with strong inducers of CYP3A4; contraindicated with rifampin and certain anticonvulsants. ↑ethinyl estradiol.
CAPSID INHIBITOR				
Lenacapavir LEN (Sunlenca)	Tablets: 300mg Injection: 463.5mg/1.5mL	<u>INITIATION DOSING (abbreviated, two-day option listed here)</u> Day 1: • 927mg SQ (2 x 1.5mL injections) PLUS 600mg PO (2 x 300mg tablets) Day 2: • 600mg PO (2 x 300mg tablets) No food restrictions with tablets <u>MAINTENANCE DOSING</u> • 927mg SQ (2 x 1.5mL injections) every 6 months	Injection site reactions (65%), swelling, pain, erythema, nodules, induration, pruritis Nausea (4%)	LEN is a P-gp, UGT 1A1, CYP3A substrate • Contraindicated with strong inducers (rifampin and certain anticonvulsants) and inhibitors (ATV/cobi). LEN is a moderate inhibitor of CYP3A • Contraindicated with certain cardiac medications. See https://www.hiv-druginteractions.org/checker

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