ARV chart

2016

January 2016

A supplement to the i-Base
Introduction to ART
### Antiretroviral drugs 2016

#### Drug names

<table>
<thead>
<tr>
<th>Fixed dose combinations §</th>
<th>Recommended adult dose *</th>
<th>Total daily pills</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Atripla</strong> (efavirenz 600 mg + emtricitabine 200 mg + tenofovir DF 300 mg)</td>
<td>One tablet, once-daily. Take at night and not with a high fat meal. See info on separate drugs.</td>
<td>1</td>
</tr>
<tr>
<td><strong>Eviplera</strong> (rilpivirine 25 mg + emtricitabine 200 mg + tenofovir DF 300 mg)</td>
<td>One tablet, once-daily, with food (390 kcal). See separate drug info.</td>
<td>1</td>
</tr>
<tr>
<td>**Striplivir (elvitegravir 150 mg + cobicistat 150 mg + emtricitabine 200 mg + tenofovir DF 300 mg)</td>
<td>One tablet, once-daily, take with food. See info on separate drugs.</td>
<td>1</td>
</tr>
<tr>
<td><strong>Triumeq</strong> (dolutegravir 50 mg + abacavir 600 mg + lamivudine 300 mg)</td>
<td>One tablet, once-daily. Take with or without food. See info on separate drugs.</td>
<td>1</td>
</tr>
<tr>
<td><strong>Genvoya</strong> (elvitegravir 150 mg + cobicistat 150 mg + emtricitabine 200 mg + TAF 10 mg)</td>
<td>One tablet, once-daily. Take with food. See info on separate drugs.</td>
<td>1</td>
</tr>
</tbody>
</table>

#### Nukes: nucleoside or nucleotide reverse transcriptase inhibitors (NRTIs)

**Dual nukes**

- **Truvada** (tenofovir DF 300 mg + emtricitabine 200 mg)
  - One tablet, once-daily. | 1 |
- **Kivexa** (abacavir 600 mg + lamivudine 300 mg)
  - One tablet, once-daily. | 1 |

**Single nukes**

- **lamivudine (3TC)** °° (Epivir [pictured] - or generic)
  - 1 x 300 mg or 2 x 150 mg (150 mg shown), (taken as a once-daily or twice-daily dose). | 1 if 300 mg
  2 if 150 mg |
- **abacavir** (Ziagen)
  - 2 x 300 mg tablets (taken as a once-daily or twice-daily dose). | 2 |
- **emtricitabine (FTC)**
  - 1 x 200 mg capsule, once-daily. | 1 |
- **tenofovir DF** (Viread)
  - 1 x 300 mg tablet, once-daily. | 1 |

§ New fixed dose combinations and coformulations might become available during 2016.

* Different doses and formulations might be used - always check the dose with your doctor and pharmacist.

** Generic versions of lamivudine, nevirapine and efavirenz may be a different colour and shape.

*** Elvitegravir is only available as a separate drug on expanded access from the manufacturer.

PK (pharmacokinetic) boosters

- **Cobicistat** (c) (Tybost)
  - 150 mg tablet, once-daily. Used to boost atazanavir, darunavir and elvitegravir. | depends on boosted drug |
- **ritonavir** (r) * (Norvir)
  - 100 mg tablets used at different doses to boost other PIs. | depends on PI |

---

### Phoneline 0808 800 6013

Monday–Wednesday 12 noon–4pm

#### NNRTIs: non-nucleoside reverse transcriptase inhibitors (non-nukes)

<table>
<thead>
<tr>
<th>Drug names</th>
<th>Recommended adult dose *</th>
<th>Total daily pills</th>
</tr>
</thead>
<tbody>
<tr>
<td>efavirenz °° ** (Sustiva) 600 mg or 200 mg</td>
<td>1 x 600 tablet (or 3 x 200 caps) once-daily; at night, not with high fat meal.</td>
<td>1 tablet (or 3 capsules)</td>
</tr>
</tbody>
</table>
| nevirapine ** 200 mg and nevirapine 400 mg (Vireamune PR) | 200 mg once-daily for first 14 days. Then 1 x 200 tablet, twice-daily or 2 x 200 mg once-daily; OR 1 x 400 mg prolonged release tablet once-daily (pic on right). | 1 or 2
(based on 200 mg or 400 mg) |
| etravirine (Intellence) | 1 x 200 mg tablet, twice daily, take with food. Dispersible in water. | 2 |
| rilpivirine § (Edurant) | 1 x 25 mg tablet, once-daily, take with main meal (500 kcal). | 1 |

#### INIs: integrase inhibitors

- **raltegravir** (Isentress)
  - 1 x 400 mg tablet, twice-daily. Take with or without food. | 2 |
- **elvitegravir** (Vitekta) °°
  - (see also Striplivir)
  - Named patient access only. | 1
  (+ 1 booster) |
- **dolutegravir** (Tivicay) * | 1 x 50 mg tablet, once-daily (or 1 x 50 mg twice-daily). With food if twice-daily but with or without otherwise. | 1 or 2 |

#### CCR5 inhibitors (entry inhibitor)

- **maraviroc** * (Celsentri)
  - 150 mg or 300 mg or 600 mg, as directed, depending on other ARVs in the combination. | 1 or 2 or 4 |

#### b/PI: boosted protease inhibitors

- **atazanavir** * § (Reyataz)
  - 1 x 300 mg cap + booster, once-daily. Take with food. 150 mg and 200 mg capsules also available. | 1
  (+ 1 booster) |
- **darunavir** * § (Prezista)
  - 1 x 800 mg + booster once-daily (or 1 x 600 mg + 100 mg booster twice-daily if resistance). Take with food. | 1 or 2
(+ 1 or 2 boosters based on dose) |

Some drugs are not recommended for first-line therapy. Smaller pills are for children or if larger pills are difficult to swallow. Some syrups are available. Pictures approximate to actual size.
Drugs that are used less frequently

Many older HIV drugs are now rarely used.
Information about these older drugs is available online.
http://i-base.info/guides/category/arvs
Please call i-Base if you would like information about other drugs printed and posted to you.
These include AZT, ddI, d4T, Combivir, Trizivir, lopinavir/r, fosmprevanvir, tipranavir and T-20.

Future drugs and combinations

Several new drugs and combinations are likely to be approved during 2015/16.
Details of these will be posted online.
http://i-base.info/guides/category/arvs
The include single pills that include the PIs atazanavir and darunavir with the booster cobicistat.

Several new fixed dose combinations in development use a new version of tenofovir DF called TAF.

After drugs are approved in Europe it usually takes the NHS from 6 to 12 months to decide on UK access.