

Case study of a single tablet antiretroviral regimen in an HIV virologically suppressed adult with severe renal impairment

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Background:

There have been limited antiretroviral treatment options for people living with human immunodeficiency virus (HIV) who have severe renal impairment or end stage renal disease. Previously this resulted in complex dose-adjusted regimens or switching of antiretrovirals to less ideal options.

Method:

Here we report a case of a client living with HIV who has complex co-morbidities, including severe renal impairment (creatinine clearance <30mL/min) who switched from a complex regimen (raltegravir, etravirine, darunavir/ritonavir) to the single tablet combination of bictegravir/emtricitabine/tenofovir alafenamide (BIC/FTC/TAF). The patient has since commenced on haemodialysis for end stage renal failure and remains on the same antiretroviral therapy.

Results:

We show the safety and tolerability of BIC/FTC/TAF in a patient who remained undetectable with no side effects from this single tablet combination. This provides support to the current limited data that BIC/FTC/TAF provides a safe, effective and convenient treatment option for patients living with HIV who have severe renal impairment. This simplification to BIC/FTC/TAF provides a convenient option for patients who often have multiple comorbidities, thereby avoiding complicated HIV dosing schedules, reducing the pill burden and risk of drug-drug interactions.

Innovation and significance:

This case report adds to the limited data in the literature on the safety, efficacy, tolerability and convenience of BIC/FTC/TAF as an option for people living with HIV who have severe renal impairment and multiple comorbidities.

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