# Diagnosis and Management of HIV-2 in Adults

_July 2019_

## Table 1: ART Regimens for Initial Treatment of Nonpregnant Adults With HIV-2*

<table>
<thead>
<tr>
<th>PREFERRED Regimens</th>
<th>Comments</th>
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<tbody>
<tr>
<td><strong>Single-Tablet Regimens</strong></td>
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| Abacavir/lamivudine/dolutegravir (ABC/3TC/DTG; Triumeq) | - Initiate *only* in patients confirmed to be negative for HLA-B*5701.  
- Initiate *only* in patients with creatinine clearance (CrCl) ≥50 mL/min.  
- Consider underlying risk of coronary heart disease.  
- Documented DTG resistance after initiation in treatment-naive patients is rare.  
- Clinicians should refer to the DHHS Recommendations for the Use of Antiretroviral Drugs in Pregnant Women with HIV Infection and Interventions to Reduce Perinatal HIV Transmission in the United States when choosing an initial regimen for individuals of childbearing potential.  
- In patients with HIV/HBV coinfection, this regimen should be used in conjunction with other anti-HBV drugs. |
| Tenofovir alafenamide/emtricitabine/bictegravir (TAF 25 mg/FTC/BIC; Biktarvy) | - Initiate *only* in patients with CrCl ≥30 mL/min.  
- Contains 25 mg of TAF, unboosted. |

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<tr>
<th>ALTERNATIVE Regimens</th>
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</table>
| Tenofovir alafenamide/emtricitabine/cobicistat/darunavir (TAF 10 mg/FTC/COBI/DRV; Symtuza) | - Initiate *only* in patients with CrCl ≥30 mL/min.  
- Carefully consider drug-drug interactions with COBI [Eron, et al. 2018].  
- Contains 10 mg TAF, boosted. |
| Tenofovir alafenamide/emtricitabine/cobicistat/elvitegravir (TAF 10 mg/FTC/COBI/EVG; Genvoya) | - Initiate *only* in patients with CrCl ≥30 mL/min.  
- Carefully consider drug-drug interactions with COBI.  
- Contains 10 mg of TAF, boosted with COBI. |

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<thead>
<tr>
<th><strong>Once-Daily Multi-Tablet Regimens</strong></th>
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</table>
| Abacavir/lamivudine and raltegravir (ABC/3TC and RAL HD; Epzicom and Isentress HD) | - Initiate *only* in patients confirmed to be negative for HLA-B*5701 and negative for HBsAg.  
- Consider underlying risk of coronary heart disease.  
- ABC/3TC once daily, RAL HD 1200 mg once daily dosed as two 600 mg HD tablets. |
| Tenofovir alafenamide/emtricitabine and darunavir and ritonavir (TAF/FTC and DRV/RTV; Descovy and Prezista and Norvir) | - Carefully consider drug-drug interactions with RTV.  
- Initiate *only* in patients with CrCl ≥30 mL/min.  
- Contains 25 mg TAF, boosted. Use with caution in individuals with stage 3 chronic kidney disease. |
### Table 1: ART Regimens for Initial Treatment of Nonpregnant Adults With HIV-2*

<table>
<thead>
<tr>
<th>Regimen</th>
<th>Notes</th>
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| Tenofovir alafenamide/emtricitabine and darunavir/cobicistat (TAF/FTC and DRV/COBI; Descovy and Prezcobix) | • Carefully consider drug-drug interactions with COBI.  
• Initiate *only* in patients with CrCl ≥30 mL/min.  
• Contains 25 mg TAF, boosted. Use with caution in individuals with stage 3 chronic kidney disease. |
| Tenofovir alafenamide/emtricitabine and dolutegravir (TAF 25 mg/FTC and DTG; Descovy and Tivicay) | • Initiate *only* in patients with CrCl ≥30 mL/min.  
• Documented DTG resistance after initiation in treatment-naive patients is rare.  
• Contains 25 mg of TAF, unboosted.  
• Clinicians should refer to the DHHS *Recommendations for the Use of Antiretroviral Drugs in Pregnant Women with HIV Infection and Interventions to Reduce Perinatal HIV Transmission in the United States* when choosing an initial regimen for individuals of childbearing potential. |
| Tenofovir alafenamide/emtricitabine and raltegravir (TAF 25 mg/FTC and RAL HD; Descovy and Isentress HD) | • Initiate *only* in patients with CrCl ≥30 mL/min.  
• To date, no clinical trials have been conducted with TAF; data are based on bioequivalence pharmacokinetic studies.  
• Contains 25 mg of TAF, unboosted.  
• TAF/FTC once daily and RAL HD 1200 mg once daily dosed as two 600 mg HD tablets. |

*Listed alphabetically; see prescribing information for individual drugs.

**Notes:** 1) In all cases, FTC and 3TC are interchangeable when not being used in fixed-dose combinations; 2) Because of their drug interaction profiles, COBI and RTV should not be considered interchangeable; 3) TAF 10 mg and TAF 25 mg are not interchangeable; and 4) Refer to Table 8: Recommended Dose Adjustments for Use of Selected Fixed-Dose Combination Antiretroviral Medications in Patients with Hepatic or Renal Impairment in the NYSDOH AI guideline for adjustment based on renal or hepatic function.

**Reference**