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**An HIV Information Site & HIV Educational Resource Site (HIS & HERS)**

## Atripla - a combination of tenofovir (Viread), emtricitabine (Emtriva) and efavirenz (Sustiva)

### General Information

Atripla is actually a combination of three antiviral drugs in one pill - **efavirenz**, **tenofovir** and **emtricitabine**. Atripla may be used as one component of a multiple drug combination.

### Specifics

Atripla is a new triple combination drug approved in July 2006 for the treatment of HIV infection

Atripla works by inhibiting the formation of HIV's genetic material. Atripla's three components consist of nucleoside (**emtricitabine**) and nucleotide (**tenofovir**) reverse transcriptase inhibitors (NRTIs) or nukes and a nonnucleoside reverse transcriptase inhibitor (**efavirenz**) or non-nuke.

### Dosing

Generally Atripla is taken as 1 pill once a day. Many people tolerate the stimulant side effects of Atripla better by taking it at bedtime. Atripla should be taken on an empty stomach.

### Adherence

(this refers to your willingness, ability, and actual performance in taking your medications)

For further information and tips on adherence, go to the **Adherence section** of this site.

**As with any antiviral drug or antibiotic, try not to ever miss a dose.** If you miss a dose and notice that you have done so within a few hours of its scheduled time, you may take the dose as usual and take the next dose at its regular time.

Do not change the dose or timing of Atripla without speaking to your healthcare provider.

**If you miss more than one dose, look at the reasons why you missed them and come up with a plan to avoid it in the future.** For example, if you fell asleep too early, take the medicine earlier in the evening, with your later meal, set an alarm, or have someone appointed to wake you up for your medicine.

It is strongly recommended that you consider using weekly pill boxes and arrange all of your doses a week in advance. Buy a small pill box so that you can carry a dose or two of your medicines with you in case you are away from home.

## Possible Side Effects

The package insert for most drugs including Atripla is often overwhelming and scary with perhaps an overemphasis on side effects. We have summarized the important and more common problems here.

### Most people take Atripla without many side effects.

Possible side effects include nightmares, restlessness, stimulation, anxiety, depression, insomnia, nausea (which usually gets better over time,) headache, muscle aches, kidney problems, liver problems, allergy or skin discoloration. Usually you will have blood tests done in the first month to look for the beneficial effects of Atripla and any side effects. Rarely Atripla can cause kidney problems, usually in persons with underlying kidney disease or people who have lost a lot of weight. There is also the possibility that Atripla can cause thinning of the bones which might result in bones which break more easily; however, the significance of this is unclear at this time. Rarely some people notice slight darkening of their palms or soles of the feet.

If someone has never taken **efavirenz** before, Atripla should be started during a period of time when high alertness and coordination are not required so that the person can adjust to the stimulant side effects.

Many minor side effects will either stay constant or get better with time. It is mainly the side effects that are severe or get worse that may cause significant health risks for you.

All drugs of this type can cause or contribute to abnormal fat redistribution characterized by thinning of the face, arms, or legs. In most cases this would be also accompanied by elevated cholesterol levels, elevated triglyceride levels, and perhaps a tendency to develop diabetes. Atripla may be better than other nukes in this respect.

Rarely, a build-up of (lactic) acid may occur due to taking medications of this type. Persons taking multiple nukes (NRTIs), those taking d4T (**stavudine**, Zerit), those on the combination of d4T (**stavudine**, Zerit) and ddI (**didanosine**, Videx), and those persons with hepatitis C or other liver diseases are the most likely to encounter this rare, but potentially fatal problem. Pregnancy may also raise the risk of this problem. The symptoms are vague but troublesome including increasing fatigue, nausea, vomiting, muscle aches, weakness, turning yellow with jaundice, and just feeling plain bad. Atripla has very little tendency to cause lactic acidosis.

If you have hepatitis B and you stop Atripla suddenly, your liver may be damaged, possibly severely. You might even die.

Atripla should not be taken by woman who may become pregnant or woman who are pregnant as birth defects are possible. More than one form of contraception should be used by women who take Atripla.

## Interactions

This refers to the way that Atripla affects other medications and how Atripla is affected by other medications.

Do not take Atripla with **Trizivir**, **Combivir**, **Epzicom**, **efavirenz** (Sustiva), **nevirapine** (Viramune), **delavirdine** (Rescriptor), **tenofovir** (Viread) or **emtricitabine** (Emtriva) pills so that you do not get too much of those drugs or duplicate the same types of drugs. **Lamivudine** (Epivir) is also useless when taken with Atripla.

Atripla should not be taken with **didanosine** (Videx EC) unless the dose of didanosine is reduced from normal.

When Atripla is taken with **atazanavir** (Reyataz), the dose of **atazanavir** should be changed in most cases to two of the 150 mg **atazanavir** (Reyataz) capsules and **ritonavir** (Norvir) boosting with 100 mg per day should be used.

**Report to your healthcare provider or go to an Emergency Room** if you have severe side effects, increasing side effects, shortness of breath, uncontrollable diarrhea, fever, weakness, jaundice (eyes and skin turn yellow,) muscle pain, nausea and vomiting so that you cannot hold down your food and liquids.

You can download this handout in PDF format by clicking **[HERE](#)**.

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