



Analysis Backs New Tenofovir's Kidney Safety Over Old Version

Researchers compared data on more than 9,000 people with HIV who took either version of tenofovir.

July 10, 2019 By [Benjamin Ryan](#)

A large pooled analysis of data from more than two dozen studies has found that Gilead Sciences' updated version of tenofovir is associated with various kidney-related safety benefits compared with the older version of the antiretroviral.

Various studies have indicated that Gilead's tenofovir alafenamide (TAF) offers such safety benefits over its older drug tenofovir disoproxil fumarate (TDF). TDF is sold alone as Viread and is part of the Truvada (tenofovir disoproxil fumarate/emtricitabine) combination pill, while TAF is not used alone for HIV but is included in several combination tablets, including Descovy (tenofovir alafenamide/emtricitabine).

Samir K. Gupta, MD, of the department of medicine at Indiana University School of Medicine in Indianapolis, and colleagues conducted a pooled analysis of 26 Phase II and III studies of people starting HIV treatment for the first time with TAF or who switched from TDF to TAF. They published their findings in the journal AIDS.

Fourteen of the studies were double blinded and randomized, six were open label and six had a single study arm. Between them they included 9,322 people, including 6,360 who started or switched to TAF-containing regimens and 2,962 who started or continued taking TDF-containing regimens. Participants were exposed to TAF for a cumulative 12,519 years and to TDF for a cumulative 5,947 years.

The median baseline age of study participants was 42 years old. Twenty-one percent of study members were female, and 27% were Black.

Among all 26 studies, there were no cases of proximal renal tubulopathy (PRT) health events or Fanconi syndrome (each are serious kidney diseases) among those receiving TAF, compared with 10 cases (0.34% of participants) among those receiving TDF. Three (0.05%) of those receiving TAF stopped taking it because of kidney-related adverse health events compared with 14 (0.47%) of those who received TDF.

Those receiving TAF also had favorable outcomes according to changes in kidney-related biomarkers through 96 weeks of treatment.

“These pooled data from 26 studies, with over 12,500 person-years of follow-up in children and adults, support the comparative renal safety of TAF over TDF,” the study authors concluded.

To read the study abstract, [click here](#).

© 2026 Smart + Strong All Rights Reserved.

<http://beta.docker.poz.com/article/analysis-backs-new-tenofovir-kidney-safety-old-version>