More Evidence That Updated Tenofovir Is Safer to Bones and Kidneys

Gilead Sciences has released results from three studies examining the effects of switching from the old tenofovir to the new version.

November 2, 2016

Switching from HIV regimens including the older form of tenofovir, known as TDF, to those with the newer form, TAF, yields comparable success suppressing the virus and less toxicities to the bones and kidneys.

Gilead Sciences announced 96-week results from one Phase III study and 48-week data from two Phase IIIb studies of individuals making such a switch, presenting findings a the 2016 HIV Glasgow conference.

Study 1089 included 663 people with a fully suppressed virus who were randomized to switch to a Descovy (emtricitabine/tenofovir alafenamide, or TAF)-based regimen or continue taking Truvada (tenofovir disoproxil fumarate, or TDF/emtricitabine) while remaining on the same third drug in their regimen. After 96 weeks of treatment, 89 percent of the participants in both groups had a fully suppressed virus.

Study 1216 included 630 people with full viral suppression who were randomized to switch to Odefsey (emtricitabine/rilpivirine/TAF) or to keep taking Complera (rilpivirine/TDF/emtricitabine). After 48 weeks of treatment, 94 percent of those on Odefsey and 94 percent of those on Complera were virally suppressed.

Study 1160 included 875 virologically suppressed individuals who were randomized to switch to Odefsey or to keep taking Atripla (efavirenz/TDF /emtricitabine). After 48 weeks of treatment, 90 percent of those on Odefsey and 92 percent of those on Atripla had a fully suppressed virus.

In all studies, tests of bone mineral density as well as indicators of kidney function indicated that TAF was less toxic on both counts.

To read a press release about the study, click here.

© 2026 Smart + Strong All Rights Reserved.