

INCIDENCE AND RISK FACTORS FOR TENOFOVIR-ASSOCIATED RENAL TOXICITY IN HIV-INFECTED PATIENTS.

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BACKGROUND

- Tenofovir (TDF) is one of the most used antiretroviral drugs for treatment of HIV infection worldwide.
- Although well tolerated, effects of TNF on renal function are still of concern.

PURPOSE

To assess tenofovir-associated renal toxicity incidence rate in HIV-infected patients and which factors may contribute to this adverse effect.

METHODS

Retrospective and observational study
(January 2010- December 2012)

INCLUDING

- More than six months on TNF treatment.
- Baseline normal creatinine clearance (CrCl).
- Three CrCl determinations.

Levels of renal insufficiency

- Moderate: CrCl<60 ml/min.
- Severe: CrCl<30 ml/min.

RESULTS AND DISCUSSION

N= 232 patients

- Male: 72%
- Mean age: 42.5±8,7 years
- Number of treatment lines prior to TNF: 2,4±2,1
- Naïve: 22%

Renal toxicity

Level of Renal insufficiency	Moderate		Severe	
	Incidence	IC 95%	Incidence	IC 95%
Incidence (per 1000 patient-year)	2.3	33.3-14.5	1.9	0.0-4.5

Multivariate analysis

FACTORS RELATED TO TOXICITY	OR	IC 95%	p
Age	1,1	1,5-7,7	p<0,01
Hypertension	2,8	1,2-6,8	p=0,03
Protease inhibitors based regimen	3,2	1,3-6,9	p<0,01
Baseline creatinine	37.9	3,5-410	p<0,01

CONCLUSIONS

- Renal toxicity among tenofovir-treated patients is common although severe cases are scarce.
- Caution should be observed in older patients and those with hypertension, PI and higher baseline creatinine even within the normal range.

Conflict of interest: Nothing to disclose