Long-term use medications and FTC/TDF PrEP

Revised December 2025

This is a summary of **key long-term use medications** to be avoided or used with caution with **emtricitabine/tenofovir-DF (FTC/TDF)** when used as PrEP.

- Interactions shown are for tenofovir disoproxil fumarate, but are expected to apply to other tenofovir disoproxil compounds (i.e., tenofovir disoproxil maleate, tenofovir disoproxil phosphate, tenofovir disoproxil succinate).
- Full details and interactions with additional comedications can be found at hiv-druginteractions.org .
- The renal safety of on-demand and daily dosed FTC/TDF PrEP was shown to be good in the ARNS-PREVENIR study (Liegeon et al, 2022).

	Advice	Comment
Analgesics		
Aspirin	Avoid	Risk of nephrotoxicity with TDF and high dose or multiple NSAIDs. The risk is increased if an NSAID is used for a long duration, if the patient has a pre-existing renal dysfunction, has a low body weight, or receives other drugs that may increase tenofovir exposure. Monitor renal function.
Celecoxib	Avoid	
Dexketoprofen	Avoid	
Diclofenac	Avoid	
Etoricoxib	Avoid	
Ibuprofen	Avoid	
Indometacin	Avoid	
Ketorolac	Avoid	
Mefenamic acid	Avoid	
Meloxicam	Avoid	
Naproxen	Avoid	
Nimesulide	Avoid	
Piroxicam	Avoid	
Antiarrhythmics		
Amiodarone	Caution	Increased TDF absorption. Monitor for TDF side effects.
Quinidine	Caution	
Anticonvulsants		
Topiramate	Avoid	Risk of nephrotoxicity with TDF. Monitor renal function.
Antidepressants		
Lithium	Avoid	Risk of nephrotoxicity with TDF. Monitor renal function.
Antifungals		
Amphotericin B	Avoid	Risk of nephrotoxicity with TDF. Monitor renal function.
Fluconazole	Caution	Increased TDF absorption. Monitor for TDF side effects.
Flucytosine	Caution	Monitor haematological parameters
Itraconazole	Caution	Increased TDF absorption. Monitor for TDF side effects.
Ketoconazole	Caution	
Posaconazole	Caution	
Voriconazole	Caution	
Antiprotozoals		
Eflornithine	Caution	Monitor renal function.
Meglumine antimoniate	Caution	
Pentamidine	Avoid	Risk of nephrotoxicity with TDF. Monitor renal function.
Pyrimethamine	Caution	Monitor renal function.
Antivirals		
Aciclovir	Caution	Monitor renal function.
Adefovir	Contra-indicated	Risk of tubular necrosis. Contraindicated.
Cidofovir	Avoid	Risk of nephrotoxicity with TDF. Monitor renal function.
Famciclovir	Caution	Monitor renal function.
Foscarnet	Avoid	Risk of nephrotoxicity with TDF. Monitor renal function.
Ganciclovir	Avoid	
Ledipasvir/Sofosbuvir	Caution	Increased TDF absorption. Monitor for TDF side effects.
Sofosbuvir/Velpatasvir	Caution	
Sofosbuvir/Velpatasvir/ Voxilaprevir	Caution	
Valaciclovir	Avoid	Risk of nephrotoxicity with TDF. Monitor renal function.
Calcium Channel Blockers		
Verapamil	Caution	Increased TDF absorption. Monitor for TDF side effects.

	Advice	Comment
Cancer Therapies		
Capecitabine	Caution	Monitor for capecitabine side effects
Carboplatin	Avoid	Risk of nephrotoxicity with TDF. Monitor renal function.
Cisplatin	Avoid	
Dacarbazine	Caution	Monitor renal function and haematological parameters.
Ifosfamide	Avoid	Risk of nephrotoxicity with TDF. Monitor renal function.
Lenalidomide	Avoid	
Lomustine	Avoid	
Methotrexate	Avoid	
Mitomycin	Avoid	
Neratinib	Caution	Increased TDF absorption. Monitor for TDF side effects.
Osimertinib	Caution	
Oxaliplatin	Avoid	Risk of nephrotoxicity with TDF. Monitor renal function.
Palbociclib	Caution	Increased TDF absorption. Monitor for TDF side effects.
Pemigatinib	Caution	
Ponatinib	Caution	
Pralsetinib	Caution	
Ribociclib	Caution	
Ruxolitinib	Caution	
Sorafenib	Avoid	Risk of nephrotoxicity with TDF. Monitor renal function.
Sotorasib	Caution	Increased TDF absorption. Monitor for TDF side effects.
Tepotinib	Caution	
Diabetes Therapies		
Canagliflozin	Avoid	Risk of bone toxicity.
Herbals/Supplements/Vitamins		
Cubeb pepper	Caution	Increased TDF absorption. Monitor for TDF side effects.
Green tea extracts	Caution	Effect on TDF is unclear.
Liquorice	Caution	Increased TDF absorption. Monitor for TDF side effects.
Turmeric	Caution	Effect on TDF is unclear.
Hypertension / Heart Failure Agents		
Bumetanide	Caution	Monitor renal function.
Furosemide	Caution	
Hydralazine	Avoid	Risk of nephrotoxicity with TDF. Monitor renal function.
Ranolazine	Caution	Increased TDF absorption. Monitor for TDF side effects.
Sacubitril	Caution	Monitor renal function.
Immune Modulators		
Hydroxyurea (Hydroxycarbamide)	Avoid	Risk of pancreatitis and hepatitis.
Interferon alpha	Avoid	Risk of hepatic decompensation.
Interleukin 2 (Aldesleukin)	Avoid	Risk of nephrotoxicity with TDF. Monitor renal function.
Peginterferon alfa-2a Peginterferon alfa-2b	Avoid	Risk of hepatic decompensation.
Immunosuppressants		
Ciclosporin	Caution	Increased TDF absorption. Monitor for TDF side effects.
Mycophenolate	Caution	Monitor renal function.
Sirolimus	Caution	
Tacrolimus	Caution	
Other		
Acetazolamide	Caution	Monitor renal function.
Penicillamine	Avoid	Risk of nephrotoxicity with TDF. Monitor renal function.
Probenecid	Caution	Monitor renal function.
Pyridostigmine	Caution	
Zoledronic acid	Avoid	Risk of nephrotoxicity with TDF. Monitor renal function.

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Effect of gastrointestinal surgery/disorders on FTC/TDF PrEP

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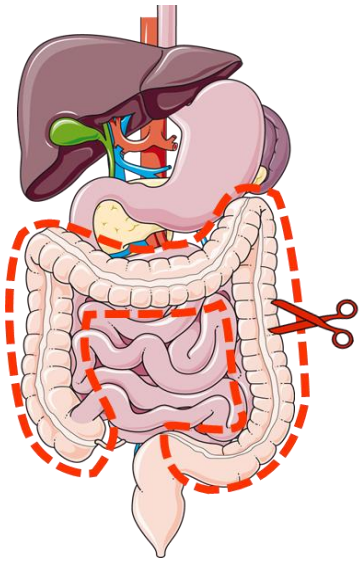
Potential pharmacokinetic changes after colonic resection

Surgery

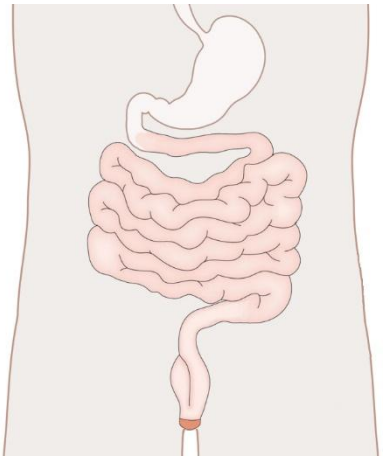


Adapted from: www.smart.servier.com

Effect on local delivery of PrEP

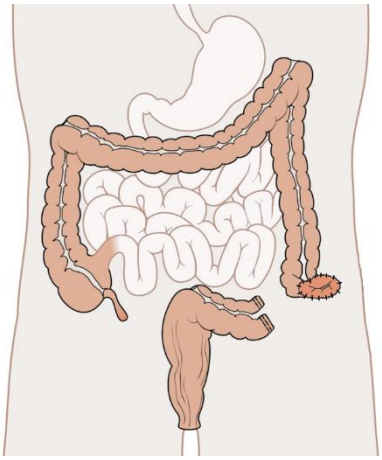
Ileoanal Anastomosis

No effect – pouch functions as new rectum



Colostomy/Ileostomy

No delivery to the rectal stump



- Impact of colonic resection on absorption of ARVs likely to be limited.
- No local delivery of oral PrEP (FTC, tenofovir) to the rectal stump following colostomy/ileostomy. Daily PrEP, rather than event-driven PrEP, is recommended.

Potential pharmacokinetic changes after bariatric surgery or with gastrointestinal disorders

- A case report describes use of the standard FTC/TDF PrEP dose in a man with a total gastrectomy (with Roux and Y anastomosis) which resulted in lower FTC and tenofovir AUC and Cmax compared with population reference values. Doubling the FTC/TDF dose reversed the lower exposure, in particular for tenofovir. (Roelofsen EE *et al*. *AIDS*. 2020; 34(13):1989-1991)
- There are also case reports of significantly lower trough plasma tenofovir concentrations (after supervised intake) in four FTC/TDF PrEP users with bariatric surgery or gastrointestinal disorders (sleeve gastrectomy, terminal ileitis, coeliac disease, or chronic diarrhoea). Trough plasma tenofovir concentrations in these users were 21 ± 9.1 ng/ml compared to 138 ± 85 ng/ml in PrEP recipients without gastrointestinal disorders. (Calcagno A *et al*. *Antimicrob Agents Chemother*. 2020; 65(1):e01902-20)
- However, plasma trough tenofovir concentrations were above the expected concentrations associated with PrEP efficacy in 9 cis-gender men who had gastrointestinal surgery prior to commencing TDF/FTC daily (*n*=8) or event-based (*n*=1) as PrEP. The mean (± SD) trough concentration of tenofovir and FTC were 90.2 ± 27.7 ng/mL and 76.0 ± 45.9 ng/mL, suggesting that PrEP can be safely given in this population, with TDM used for reassurance. (Ismail M *et al*. *Int J STD AIDS*. 2025; 36(3):250-254)
- Tenofovir diphosphate concentrations were determined in 6 cis-gender men who had Roux-en-Y gastric bypass or sleeve gastrectomy surgery prior to starting PrEP (FTC/TDF, n=4); FTC/TAF, n=2). Concentrations were above the therapeutic values in 5/6 participants, with one participant taking FTC/TDF having a value of 1289 fmol/punch (target 1400 fmol/punch). (McGarrity MW et al. HIV Med. 2025; 26(4):643-649)
- When FTC/TDF PrEP is used in patients with gastrointestinal disorders or following gastrointestinal surgery, these patients may require TDM with dose increase if exposure is low.

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