



# Atripla

**nam** aidsmap

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## What is *Atripla*?

*Atripla* is a medication used to treat HIV. It is a combination of three separate antiretroviral drugs in one pill, taken once a day.

It combines 600mg efavirenz, 200mg emtricitabine and 245mg tenofovir disoproxil in a pink, film-coated tablet. The tablet has '123' on one side.

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## How does *Atripla* work?

*Atripla* combines three drugs in one pill. Two of the drugs (emtricitabine and tenofovir disoproxil) are from a class of drugs known as NRTIs (nucleoside/nucleotide reverse transcriptase inhibitors). The third drug, efavirenz, is a non-nucleoside reverse transcriptase inhibitor (NNRTI). Each drug class works against HIV in a different way.

The aim of HIV treatment is to reduce the level of HIV (the 'viral load') in your body until it is undetectable – usually less than 50 copies of virus per ml of blood. Taking HIV treatment and having an undetectable viral load protects your immune system and stops HIV being passed on to someone else during sex.

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## How do I take *Atripla*?

You should take *Atripla* once a day. The tablet should be swallowed whole; do not chew, crush or split it. Taking *Atripla* on an empty stomach (i.e. one hour before or two hours after food) can reduce the risk of some side-effects, including drowsiness and abnormal dreams.

Many people who have taken *Atripla* have found that it is best to take it before going to bed. This is because the side-effects include feeling drowsy or dizzy.

HIV treatment works best if you take it every day, ideally at the same time each day. It may help to set an alarm, e.g. on your mobile phone, to remind you. If you forget to take a dose of *Atripla* and realise within 12 hours of the time you usually take it, take it as soon as possible then take your next dose at your usual time. If you realise more than 12 hours late don't take a double dose, just skip the dose you've forgotten and then carry on with your normal routine.

If you are sick (vomit) within 1 hour of taking your *Atripla* tablet, you should take another tablet; if you vomit more than 1 hour after your dose there is no need to repeat the dose

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## What are the side-effects of *Atripla*?

All medicines have possible side-effects. It's a good idea to talk to your doctor, nurse or pharmacist about what to expect before you start taking any medication, and how to manage any side-effects which occur.

A full list of side-effects, including less common side-effects, can be found in the patient information leaflet that comes with *Atripla*.

Side-effects can be described as:

**Common** – a side-effect that occurs in at least one in a hundred people (more than 1%) who take this drug.

**Uncommon** – a side-effect that occurs in fewer than one in a hundred people (less than 1%) who take this drug.

Common side-effects of *Atripla* include (most common in **bold**):

- **dizziness, headache**, difficulty sleeping, abnormal dreams, difficulty concentrating, drowsiness, weakness. These may occur within the first day or two of taking *Atripla* and should wear off within the first two to four weeks.
- **nausea (feeling sick), vomiting (being sick), diarrhoea**, stomach pains, feeling bloated, flatulence.
- **skin rash**, allergic reaction, dark skin patches (often starting on the hands or soles of feet). You should discuss any skin rash with your doctor as soon as possible.
- changes in the results of some blood tests (e.g. liver and kidney tests, cholesterol).

*Atripla* can also have side-effects which affect your mental health. It is common to feel worried, anxious or depressed. Some people have experienced more serious side-effects such as suicidal thoughts, paranoia and mood changes, which are uncommon. It is more likely that you will experience these serious side-effects if you have a history of mental illness. Talk to your doctor if you have concerns about these side-effects, particularly if you think you are experiencing any of them.

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## Does *Atripla* interact with other drugs?

You should always tell your doctor and pharmacist about any other drugs or medication you are taking. That includes anything prescribed by another doctor, medicines you have

bought from a high-street chemist, herbal and alternative treatments, and recreational or party drugs ('chems').

Some medicines or drugs are not safe if taken together – the interaction could cause increased, dangerous levels, or it could stop one or both of the drugs from working. Other drug interactions are less dangerous but still need to be taken seriously. If levels of one drug are affected, you may need to change the dose you take. This must only be done on the advice of your HIV doctor.

If you are taking *Atripla* it's important to check with your HIV doctor or pharmacist before taking any medicines from the following groups:

- antibiotics
- antiepileptic medication
- anticoagulants (medication to thin the blood)
- antidepressants
- medication for high blood pressure
- medication to lower cholesterol (e.g. statins)
- methadone
- herbal medicines – in particular St Johns Wort and Ginkgo biloba should not be taken
- contraceptives (birth control) – *Atripla* can make some contraceptives less effective.  
Your healthcare team will help choose the right method of contraception for you.

The patient information leaflet which comes with your *Atripla* has a full list of medicines which should be avoided.

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## Can I take *Atripla* in pregnancy?

*Atripla* is not recommended for women during pregnancy, however many women have taken *Atripla* while pregnant without any problems.

If you are considering having a baby, or think you might be pregnant, talk to your doctor as soon as possible about which drug combination would be right for you. It is important to take antiretroviral treatment during pregnancy to prevent passing HIV from mother to baby.

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## Talking to your doctor

If you have any concerns about your treatment or other aspects of your health, it's important to talk about these. For example, if you have any symptom or side-effect which may be from your treatment, or if you are finding it difficult to take your medication every day, one of your healthcare team will be able to help.

Building a relationship with a doctor may take time. You may feel very comfortable talking to your doctor, but some people find it more difficult, particularly when talking about sex, mental health, or symptoms they find embarrassing. It's also easy to forget things you wanted to talk about.

Preparing for an appointment can be very helpful. Take some time to think about what you are going to say. You might find it helpful to talk to someone else first, or to make some notes and bring them to your appointment. Our online tool *Talking points* may help you to prepare for your next appointment – visit [www.aidsmap.com/talking-points](http://www.aidsmap.com/talking-points)

*For detailed information on this drug, visit the **Atripla** pages in the HIV treatments directory.*

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We recommend that this information should always be used in conjunction with professional medical advice.

This factsheet is produced by an organisation called NAM, and has been reviewed by members of our volunteer panels of people living with HIV and medical professionals. We welcome your feedback on our information resources.

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