



Reply to “Antiretroviral therapy options in people living with HIV at risk of or with osteoporosis. Comment on: Diagnosis, prevention, and treatment of bone fragility in people living with HIV: a position statement from the Swiss Association against Osteoporosis”

by S. Noe, H. Jaeger, E. Wolf

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Dear Editor,

We thank Noe and colleagues for their interest [1] in our position statement of the Swiss Association against Osteoporosis on diagnosis, prevention, and treatment of bone fragility in people living with HIV [2]. We agree that several options exist to avoid tenofovir disoproxil fumarate (TDF)-containing antiretroviral therapy (ART) in patients with established osteoporosis or with a relatively high risk of fracture and significant bone loss associated with high levels of bone resorption markers (CTX). We emphasize that virological efficacy prevails and that the choice of alternative ART regimen will be patient-specific and the decision of the referent infectiologist. In patients with adequate HIV replication control by TDF-containing regimens, we suggested in the algorithm a tenofovir alafenamide (TAF) equivalent as an alternative to TDF with the idea of continuing an effective tenofovir regimen especially in patients with a hepatitis B co-infection. However, any other TDF-sparing regimens applicable to the patient may be considered

by the referent infectiologist. For ART-naïve or experienced PLWH, dual regimens are an interesting option but only in some patients without co-infections with hepatitis B, with no documented resistance mutations. In clinical practice, TAF- or abacavir-containing regimens are often considered as first-line regimens in ART-naïve patients with bone fragility.

Compliance with ethical standards

Conflict of interest Alexandra Calmy has received travel grants from Gilead and unrestricted educational grants from Gilead, ViiV, MSD, and AbbVie. Emmanuel Biver and Christian Meier declare that they have no conflict of interest.

References

1. Noe S, Jaeger H, Wolf E (2019) Antiretroviral therapy options in people living with HIV at risk of or with osteoporosis. Comment on: Diagnosis, prevention, and treatment of bone fragility in people living with HIV: a position statement from the Swiss Association against Osteoporosis. *Osteoporos Int*. <https://doi.org/10.1007/s00198-019-05024-4>
2. Biver E, Calmy A, Aubry-Rozier B, Birkhäuser M, Bischoff-Ferrari HA, Ferrari S, Frey D, Kressig RW, Lamy O, Lippuner K, Suhm N, Meier C (2019) Diagnosis, prevention, and treatment of bone fragility in people living with HIV: a position statement from the Swiss Association against Osteoporosis. *Osteoporos Int* 30:1125–1135

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