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**Presentation Title:** Comparison of Renal Function on NNRTI vs. Boosted PI based Tenofovir based Regimens

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**Background:** Discordant results comparing the possible effect of TDF on renal function have been reported. In some studies, being on a boosted protease inhibitor (PI) has been associated with diminished renal function as opposed to being on a non-nucleoside reverse transcriptase inhibitor (NNRTI). **Methods:** Patients attending an urban clinic initiated on TDF between 11/01-12/05 were analyzed. Patients on HAART for at least three months and had creatinine measurements at initiation and during therapy were included. The GFR was estimated using the MDRD equation. Patients were stratified by use of NNRTI or boosted PI regimen. AA comprised 67% of the cohort. **Results:** 250 patients were included in the analysis. 140 patients were on tenofovir regimens that included a PI with norvir, compared to 110 patients who were taking tenofovir concomitantly with a NNRTI. 3 patients had therapy changes due to renal problems. We found no evidence of significant changes in GFR from baseline during the first two years therapy ( $P > .05$ ). Multivariate analysis including age, sex, hypertension, diabetes, and naïve status did not alter these findings. **Conclusions:** There was no change in creatinine clearance with either a Boosted PI or NNRTI. Sub analysis of the AA population did show a significant difference in first year of therapy; however, these differences were not statistically different over the second year of treatment.

