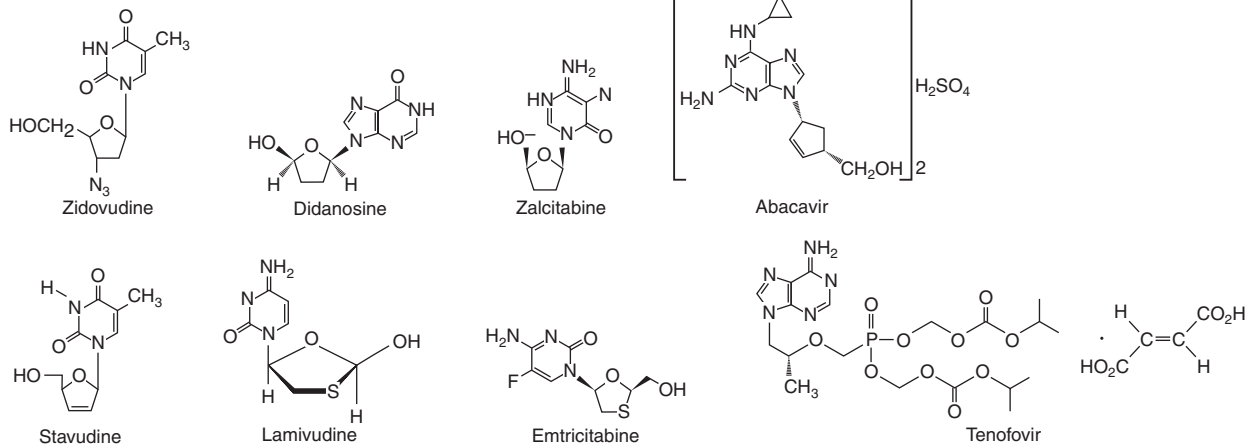


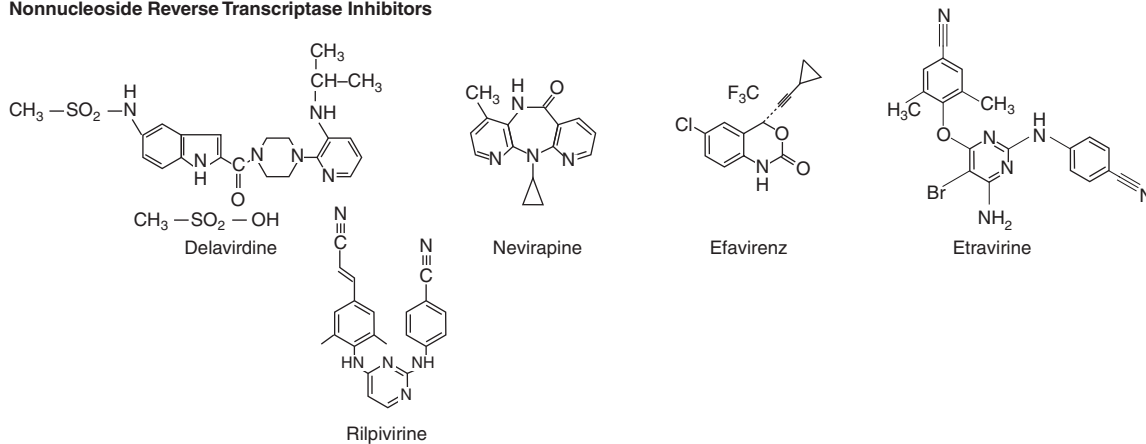
1276 below) is a frequent element of many different combination regimens currently in use. These two drugs and the nucleotide reverse transcriptase inhibitor tenofovir (see below) also have activity against hepatitis B virus. For this reason flares of hepatitis may be seen in co-infected patients starting and/or or stopping any of these three agents due to the confounding issues of direct effects

on hepatitis B, direct effects on HIV, and immune reconstitution (see above). To prevent the development of resistant strains of HIV, these drugs should never be used on their own for the treatment of hepatitis B in the patient with HIV infection. Lamivudine is available either alone or in coformulations including zidovudine and/or abacavir (Table 226-22). One reason behind the excellent synergy

Nucleoside or Nucleotide Reverse Transcriptase Inhibitors



Nonnucleoside Reverse Transcriptase Inhibitors



Protease Inhibitors

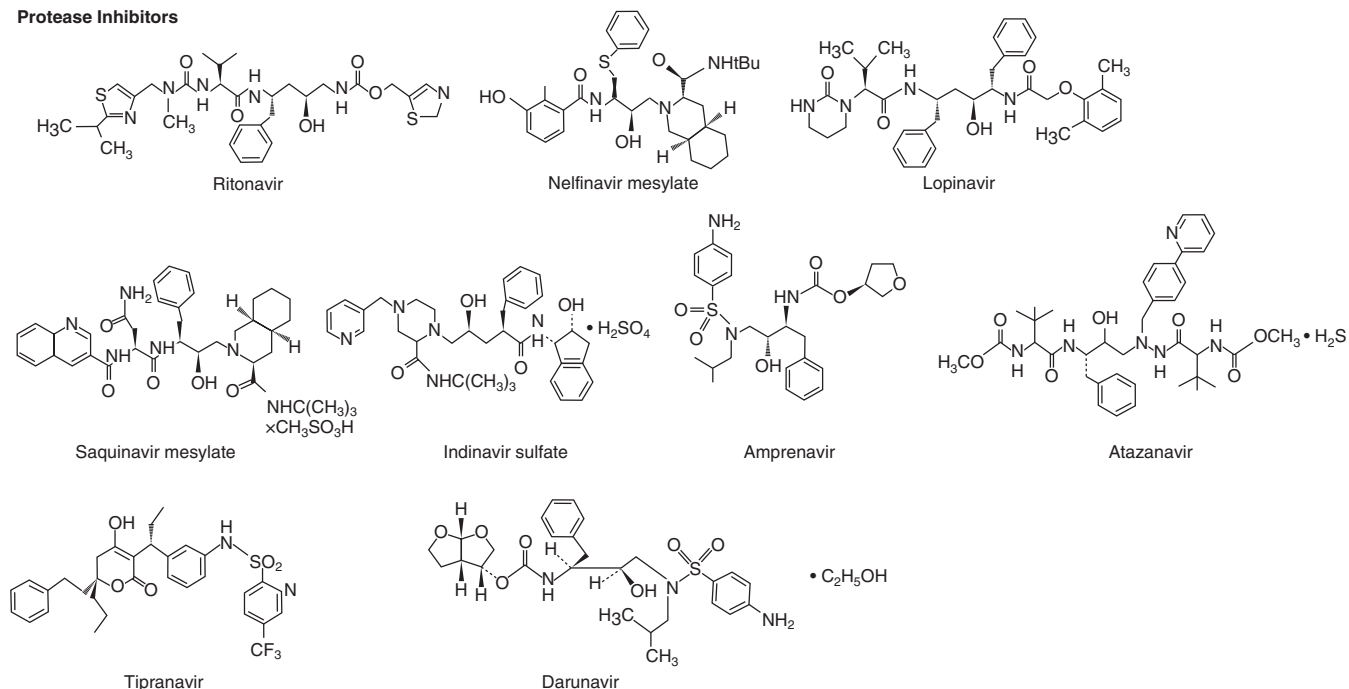


FIGURE 226-45 Molecular structures of antiretroviral agents.