

FDA Approval of HIV Medicines

1981: First AIDS cases are reported in the United States.

1985-89	1995-99	2000-04	2005-09	2010-14	2015-19	2020-24	2025-Now
<p>1987 Zidovudine (NRTI)</p>	<p>1995 Lamivudine (NRTI) Saquinavir Mesylate* (PI)</p> <p>1996 Indinavir* (PI) Nevirapine (NNRTI) Ritonavir (PI)</p> <p>1997 Combivir† (FDC) Delavirdine* (NNRTI) Nelfinavir* (PI) Saquinavir* (PI)</p> <p>1998 Abacavir (NRTI) Efavirenz (NNRTI)</p> <p>1999 Amprenavir* (PI)</p>	<p>2000 Didanosine EC* (NRTI) Kaletra (FDC) Trizivir* (FDC)</p> <p>2001 Tenofovir DF (NRTI)</p> <p>2002 Stavudine XR* (NRTI)</p> <p>2003 Atazanavir (PI) Emtricitabine (NRTI) Enfuvirtide* (FI) Fosamprenavir* (PI)</p> <p>2004 Epzicom† (FDC) Truvada (FDC)</p>	<p>2005 Tipranavir* (PI)</p> <p>2006 Atripla† (FDC) Darunavir (PI)</p> <p>2007 Maraviroc (CA) Raltegravir (INSTI)</p> <p>2008 Etravirine (NNRTI)</p>	<p>2011 Complera (FDC) Nevirapine XR (NNRTI) Rilpivirine (NNRTI)</p> <p>2012 Stribild (FDC) Truvada (PrEP)</p> <p>2013 Dolutegravir (INSTI)</p> <p>2014 Cobicistat (PE) Elvitegravir* (INSTI) Triumeq (FDC)</p>	<p>2015 Evotaz (FDC) Genvoya (FDC) Prezcobix (FDC)</p> <p>2016 Descovy (FDC) Odefsey (FDC)</p> <p>2017 Juluca (FDC) Raltegravir HD (INSTI)</p> <p>2018 Biktarvy (FDC) Cimduo (FDC) Delstrigo (FDC) Doravirine (NNRTI) Ibalizumab-uiyk (PAI) Symfi (FDC) Symfi Lo† (FDC) Symtuza (FDC) Temixys* (FDC)</p> <p>2019 Dovato (FDC) Descovy (PrEP)</p>	<p>2020 Fostemsavir* (AI) Tivicay PD (INSTI)</p> <p>2021 Cabenuva (FDC) Cabotegravir (INSTI) Cabotegravir (PrEP)</p> <p>2022 Triumeq PD (FDC) Lenacapavir (CI)</p> <p>2024 Rilpivirine PED (NNRTI)</p>	<p>2025 Lenacapavir (PrEP)</p>

Drug Class Abbreviations: AI: Attachment Inhibitor; CA: CCR5 Antagonist; CI: Capsid Inhibitors; FDC: Fixed-Dose Combination; FI: Fusion Inhibitor; INSTI: Integrase Inhibitor; NNRTI: Non-Nucleoside Reverse Transcriptase Inhibitor; NRTI: Nucleoside Reverse Transcriptase Inhibitor; PE: Pharmacokinetic Enhancer; PI: Protease Inhibitor; PAI: Post-Attachment Inhibitor; PrEP: Pre-Exposure Prophylaxis

Note: Approvals are for HIV treatment, unless otherwise indicated.

*Drugs in gray are no longer available and/or are no longer recommended for use in the United States by the HHS HIV/AIDS medical practice guidelines. These drugs may still be used in fixed-dose combination formulations.

†Fixed-dose combination brand products that are available as generic only.

For more information, visit HIVinfo.NIH.gov.

