

# Is Truvada a License to ILL?

August 26, 2014 By [Jason Panda](#)

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Recently, New York state's Governor Mario Cuomo announced his new HIV initiative. The goal of the initiative is to significantly reduce HIV infections in New York state by the year 2020. The Governor's plan is centered on a strategy that would provide the FDA-approved pill Truvada to people who are at high risk of contracting HIV. So how does Truvada work?

Truvada combines two medicines,--tenofovir and emtricitabine--that are currently used to treat HIV. PrEP treatments such as Truvada are categorized as pre-exposure prophylaxis and work to prevent HIV from infecting those who don't have the virus. When folks are exposed to HIV through injection drug use or sex, the combination of medications in Truvada can often stop HIV infection.

But to work effectively, the drug must be taken each day to reach sufficient levels in the bloodstream. In several studies of PrEP, the risk of getting HIV infection was much lower--by up to 92 percent--for those who consistently took the medicines compared with those who didn't take the meds.

According to Cuomo's plan, Truvada should be considered for targeted at-risk populations, or people who are at substantial risk of HIV Infection. (This strategy is also in line with the [Centers for Disease Control and Prevention's recommendations](#).) These populations include the following groups:

Heterosexual men or women who don't regularly use condoms during sex with partners of unknown HIV status who are also at substantial risk of HIV infection (for example, people who inject drugs or have bisexual male partners);

Anyone who is not in a mutually monogamous relationship with a partner who recently tested HIV-negative;

Anyone who is in an ongoing relationship with an HIV-positive partner;

Gay or bisexual men who have had anal sex without a condom or been diagnosed with an STD in the past 6 months; and

Injection drug users, including those who have injected illicit drugs in the past 6 months and have shared injection equipment, or been in drug treatment for injection drug use in the past 6 months.

The strategy is properly positioned to reach a wide net of people, and if properly executed can serve as a very innovative and effective HIV prevention tool. Still, no prevention strategy is 100 percent effective. This is why it's important that Governor Cuomo, and other New York state

Department of Health officials, remember that innovation is neither a substitute nor a replacement for education.

As the founder of b condoms, a socially-responsible condom company that works to promote education and prevent STIs and unwanted pregnancies among multicultural millennials, I can share firsthand that it's critical we balance PrEP medicines, such as Truvada, with successful educational prevention programs.

We must continue to emphasize prevention methods that include condom education, condom accessibility and testing. Why? Because the adoption of the mentality that "a Truvada a day keeps HIV away" would be, in essence, a license to ILL.

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