

Table 24f. Drug Interactions Between HIV-1 gp120-Directed Attachment Inhibitors and Other Drugs (Including Antiretroviral Agents)**(Last updated June 3, 2021; last reviewed June 3, 2021)** (page 1 of 3)

Fostemsavir (FTR), an HIV-1 gp120-directed attachment inhibitor, is a prodrug of temsavir (TMR). In this table, the effect on gp120-directed attachment inhibitor refers to TMR concentrations. Recommendations for managing a particular drug interaction may differ depending on whether a new antiretroviral (ARV) drug is being initiated in a patient on a stable concomitant medication or whether a new concomitant medication is being initiated in a patient on a stable ARV regimen. The magnitude and significance of drug interactions are difficult to predict when several drugs with competing metabolic pathways are prescribed concomitantly. Providers should exercise their clinical judgement to select the most appropriate alternative medication to use in cases where an interacting drug needs to be replaced with an alternative.

Concomitant Drug Class/ Name	Effect on gp120-directed Attachment Inhibitor and/or Concomitant Drug Concentrations	Dosing Recommendations and Clinical Comments
Acid Reducers		
H2 Receptor Antagonists	↔ TMR	No dose adjustment needed.
Antibacterials		
<i>Antimycobacterials</i>		
Rifabutin	With Rifabutin 300 mg once daily and without RTV • TMR AUC ↓ 30% With Rifabutin 150 mg once daily and with RTV 100 mg once daily • TMR AUC ↑ 66%	If Used Without PI/r: • No dosage adjustment needed. If Used With PI/r: • Recommended dose is rifabutin 150 mg once daily. • No dosage adjustment of FTR.
Rifampin	TMR AUC ↓ 72%	Contraindicated.
Rifapentine	↓ TMR expected	Do not coadminister.
Anticonvulsants		
Carbamazepine, Phenobarbital, Phenytoin	↓ TMR expected	Contraindicated.
Hepatitis C Direct-Acting Antivirals		
Daclatasvir	↔ expected	No dose adjustment needed.
Dasabuvir plus Ombitasvir/ Paritaprevir/RTV	↔ expected	No dose adjustment needed.
Elbasvir/Grazoprevir	↑ grazoprevir expected	Increased grazoprevir exposures may increase the risk of ALT elevations. Use an alternative HCV regimen.
Glecaprevir/Pibrentasvir	↔ expected	No dose adjustment needed.
Ledipasvir/Sofosbuvir	↔ expected	No dose adjustment needed.
Sofosbuvir	↔ expected	No dose adjustment needed.
Sofosbuvir/Velpatasvir	↔ expected	No dose adjustment needed.
Sofosbuvir/Velpatasvir/ Voxilaprevir	↑ voxilaprevir expected	Use an alternative HCV regimen if possible.

Table 24f. Drug Interactions Between HIV-1 gp120-Directed Attachment Inhibitors and Other Drugs (Including Antiretroviral Agents)

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Concomitant Drug Class/ Name	Effect on gp-120-Directed Attachment Inhibitor and/or Concomitant Drug Concentrations	Dosing Recommendations and Clinical Comments
Herbal Products		
St. John's Wort	↓ TMR expected	Contraindicated.
Hormonal Therapies		
Contraceptives: Oral	ethinyl estradiol AUC ↑ 40% ↔ norethindrone	Prescribe oral contraceptive that contains no more than 30 mcg of ethinyl estradiol ^a or use alternative ARV or contraceptive methods.
Gender-Affirming Hormone Therapies	No data	No data available to make dose recommendation.
Menopausal Hormone Replacement Therapy	No data	No data available to make dose recommendation.
Lipid-Modifying Agents		
Atorvastatin, Fluvastatin, Pitavastatin, Simvastatin	↑ statin possible ↔ expected ↔ TMR expected	Increased statin concentration may not be clinically relevant. Follow clinical guidelines. Administer the lowest effective statin dose while monitoring for adverse events.
Rosuvastatin	Rosuvastatin AUC ↑ 69%	Increased rosuvastatin concentration may not be clinically relevant. Follow clinical guidelines. Administer the lowest effective dose while monitoring for adverse events.
Narcotics and Treatment for Opioid Dependence		
Buprenorphine/naloxone	Buprenorphine AUC ↑ 30% Norbuprenorphine (active metabolite) AUC ↑ 39%	No dose adjustment needed.
Methadone	↔ Total methadone ↔ R(-) methadone (active metabolite) ↔ S(+) methadone	No dose adjustment needed.
Antiretroviral Drugs		
<i>CCR5 Antagonist</i>		
MVC	↔ TMR MVC AUC ↑ 25%	No dose adjustment needed.
<i>INSTIs</i>		
BIC, CAB (IM or PO), DTG, EVG/c	↔ TMR expected	No dose adjustment needed.
RAL + TDF	↔ TMR	No dose adjustment needed.
<i>NRTIs</i>		
TDF	↔ TMR ↔ TDF	No dose adjustment needed.

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Concomitant Drug Class/ Name	Effect on gp-120-Directed Attachment Inhibitor and/or Concomitant Drug Concentrations	Dosing Recommendations and Clinical Comments
<i>NNRTIs</i>		
DOR, RPV (IM or PO)	↔ TMR expected	No dose adjustment needed.
EFV	↓ TMR possible ↔ EFV expected	No dose adjustment needed.
ETR	TMR AUC ↓ 50% ↔ ETR	No dose adjustment needed.
ETR + DRV/r	TMR C _{max} and AUC ↑ 34% to 53% ↔ DRV, RTV ETR AUC ↑ 28%	No dose adjustment needed.
<i>PIs</i>		
ATV, ATV/c	↑ TMR possible ↔ ATV expected	No dose adjustment needed.
ATV/r	TMR C _{max} and AUC ↑ 54% to 58% ↔ ATV, RTV	No dose adjustment needed.
DRV/c	TMR C _{max} and AUC ↑ 79% to 97% ↔ DRV, RTV expected	No dose adjustment needed.
DRV/r	TMR C _{max} and AUC ↑ 52% to 63% ↔ DRV, RTV	No dose adjustment needed.
LPV/r	↑ TMR possible ↔ LPV expected	No dose adjustment needed.

^a The following products contain no more than 30 mcg of ethinyl estradiol combined with norethindrone or norgestimate: Lo Minastrin Fe; Lo Loestrin Fe; Loestrin 1/20, 1.5/30; Loestrin Fe 1/20, 1.5/30; Loestrin 24 Fe; Minastrin 24 Fe; Ortho Tri-Cyclen Lo. Generic formulations also may be available.

Key to Symbols:

↑ = increase

↓ = decrease

↔ = no change

Key: ALT = alanine aminotransferase; ARV = antiretroviral; ATV = atazanavir; ATV/c = atazanavir/cobicistat; ATV/r = atazanavir/ritonavir; AUC = area under the curve; BIC = bictegravir; C_{max} = maximum plasma concentration; CAB = cabotegravir; DOR = doravirine; DRV = darunavir; DRV/c = darunavir/cobicistat; DRV/r = darunavir/ritonavir; DTG = dolutegravir; EFV = efavirenz; ETR = etravirine; EVG = elvitegravir; EVG/c = elvitegravir/cobicistat; FTR = fostemsavir; INSTI = integrase strand transfer inhibitor; HCV = hepatitis C virus; IM = intramuscular; LPV = lopinavir; LPV/r = lopinavir/ritonavir; MVC = maraviroc; NNRTI = non-nucleoside reverse transcriptase inhibitor; PI = protease inhibitor; PI/r = ritonavir-boosted PI; PO = by mouth; RAL = raltegravir; RPV = rilpivirine; RTV = ritonavir; TDF = tenofovir disoproxil fumarate; TMR = temsavir