



## **Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents with HIV**

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**Table 21e. Drug Interactions between the CCR5 Antagonist Maraviroc and Other Drugs (Including Antiretroviral Agents) (Last updated December 18, 2019; last reviewed December 18, 2019)** (page 1 of 3)

In the table below, “No dose adjustment needed” indicates that the FDA-approved dose of MVC 300 mg twice daily should be used. Recommendations for managing a particular drug interaction may differ depending on whether a new ARV drug is being initiated in a patient on a stable concomitant medication or 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. **In cases where an interacting drug needs to be replaced with an alternative, providers should exercise their clinical judgement to select the most appropriate alternative medication to use.**

Concomitant Drug Class/Name	Effect on CCR5 Antagonist and/or Concomitant Drug Concentrations	Dosing Recommendations and Clinical Comments
<b>Antibacterial Agents</b>		
<b>Antimycobacterials</b>		
Rifabutin	↓ MVC possible	<b>If Used Without a Strong CYP3A Inhibitor:</b> • MVC 300 mg twice daily  <b>If Used With a Strong CYP3A Inhibitor:</b> • MVC 150 mg twice daily
Rifampin	MVC AUC ↓ 63%	<b>If Used Without a Strong CYP3A Inhibitor:</b> • MVC 600 mg twice daily  <b>If Used With a Strong CYP3A Inhibitor:</b> • Consider alternative ARV or antimycobacterial.
Rifapentine	↓ MVC expected	<b>Do not coadminister.</b>
<b>Macrolides</b>		
<b>Azithromycin</b>	↔ MVC expected	No dose adjustment needed.
Clarithromycin	↑ MVC possible	MVC 150 mg twice daily
<b>Erythromycin</b>	↑ MVC possible	No dose adjustment needed.
<b>Anticonvulsants</b>		
Carbamazepine, Phenobarbital, Phenytoin	↓ MVC possible	<b>If Used Without a Strong CYP3A Inhibitor:</b> • MVC 600 mg twice daily  <b>If Used With a Strong CYP3A Inhibitor:</b> • MVC 150 mg twice daily
<b>Eslicarbazepine</b>	↓ MVC possible	Consider alternative ARV or anticonvulsant.
<b>Oxcarbazepine</b>	↓ MVC possible	Consider alternative ARV or anticonvulsant.
<b>Antifungals</b>		
<b>Fluconazole</b>	↑ MVC possible	No dose adjustment needed.
Isavuconazole	↑ MVC possible	No dose adjustment needed.
Itraconazole	↑ MVC possible	MVC 150 mg twice daily
Posaconazole	↑ MVC possible	MVC 150 mg twice daily
Voriconazole	↑ MVC possible	MVC 150 mg twice daily
<b>Hepatitis C Direct-Acting Antivirals</b>		
Daclatasvir	↔ MVC expected ↔ daclatasvir expected	No dose adjustment needed.
Dasabuvir plus Ombitasvir/ Paritaprevir/RTV	↑ MVC expected	<b>Do not coadminister.</b>
Elbasvir/Grazoprevir	↔ MVC expected	No dose adjustment needed.

**Table 21e. Drug Interactions between the CCR5 Antagonist Maraviroc and Other Drugs (Including Antiretroviral Agents) (Last updated December 18, 2019; last reviewed December 18, 2019)** (page 2 of 3)

Concomitant Drug Class/Name	Effect on CCR5 Antagonist and/or Concomitant Drug Concentrations	Dosing Recommendations and Clinical Comments
<b>Hepatitis C Direct-Acting Antivirals</b> , continued		
Glecaprevir/Pibrentasvir	↔ MVC expected	No dose adjustment needed.
Ledipasvir/Sofosbuvir	↔ MVC expected	No dose adjustment needed.
Simeprevir	↔ MVC expected	No dose adjustment needed.
Sofosbuvir	↔ MVC expected	No dose adjustment needed.
Sofosbuvir/Velpatasvir	↔ MVC expected	No dose adjustment needed.
Sofosbuvir/Velpatasvir/Voxilaprevir	↔ MVC expected	No dose adjustment needed.
<b>Herbal Products</b>		
St. John's Wort	↓ MVC expected	<b>Do not coadminister.</b>
<b>Hormonal Therapies</b>		
Hormonal Contraceptives	↔ ethinyl estradiol or levonorgestrel	No dose adjustment needed.
Menopausal Hormone Replacement Therapy	↔ MVC or hormone replacement therapies expected	No dose adjustment needed.
Gender-Affirming Hormone Therapies	↔ MVC or gender-affirming hormones expected	No dose adjustment needed.
<b>Antiretroviral Drugs</b>		
<b>INSTIs</b>		
BIC, DTG	↔ MVC expected	No dose adjustment needed.
EVG/c	↑ MVC possible	MVC 150 mg twice daily
RAL	MVC AUC ↓ 21% RAL AUC ↓ 37%	No dose adjustment needed.
<b>NNRTIs</b>		
DOR, RPV	↔ MVC expected	No dose adjustment needed.
EFV	MVC AUC ↓ 45%	<b>If Used <u>Without</u> a Strong CYP3A Inhibitor:</b> • MVC 600 mg twice daily <b>If Used <u>With</u> a Strong CYP3A Inhibitor:</b> • MVC 150 mg twice daily
ETR	MVC AUC ↓ 53%	<b>If Used <u>Without</u> a Strong CYP3A Inhibitor:</b> • MVC 600 mg twice daily <b>If Used <u>With</u> a Strong CYP3A Inhibitor:</b> • MVC 150 mg twice daily
NVP	↔ MVC AUC	<b>If Used <u>Without</u> a Strong CYP3A Inhibitor:</b> • MVC 300 mg twice daily <b>If Used <u>With</u> a Strong CYP3A Inhibitor:</b> • MVC 150 mg twice daily • With TPV/r, use MVC 300 mg twice daily
<b>PIs</b>		
ATV, ATV/c, ATV/r	<b>With Unboosted ATV:</b> • MVC AUC ↑ 257% <b>With (ATV/r 300 mg/100 mg) Once Daily:</b> • MVC AUC ↑ 388%	MVC 150 mg twice daily

**Table 21e. Drug Interactions between the CCR5 Antagonist Maraviroc and Other Drugs (Including Antiretroviral Agents) (Last updated December 18, 2019; last reviewed December 18, 2019)** (page 3 of 3)

Concomitant Drug Class/Name	Effect on CCR5 Antagonist and/or Concomitant Drug Concentrations	Dosing Recommendations and Clinical Comments
<b>PIs, continued</b>		
<b>DRV/c, DRV/r</b>	<b>With (DRV/r 600 mg/100 mg) Twice Daily:</b> • MVC AUC ↑ 305%  <b>With (DRV/r 600 mg/100 mg) Twice Daily and ETR:</b> • MVC AUC ↑ 210%	MVC 150 mg twice daily
<b>LPV/r</b>	MVC AUC ↑ 295%  <b>With LPV/r and EFV:</b> • MVC AUC ↑ 153%	MVC 150 mg twice daily
<b>TPV/r</b>	<b>With (TPV/r 500 mg/200 mg) Twice Daily:</b> • ↔ MVC AUC	No dose adjustment needed.

**Key to Symbols:**

↑ = increase

↓ = decrease

↔ = no change

**Key:** ARV = antiretroviral; ATV = atazanavir; ATV/c = atazanavir/cobicistat; ATV/r = atazanavir/ritonavir; AUC = area under the curve; BIC = bictegravir; CYP = cytochrome P; DOR = doravirine; DRV/c = darunavir/cobicistat; DRV/r = darunavir/ritonavir; DTG = dolutegravir; EFV = efavirenz; ETR = etravirine; EVG/c = elvitegravir/cobicistat; FDA = Food and Drug Administration; INSTI = integrase strand transfer inhibitor; LPV/r = lopinavir/ritonavir; MVC = maraviroc; NNRTI = non-nucleoside reverse transcriptase inhibitor; NVP = nevirapine; PI = protease inhibitor; RAL = raltegravir; RPV = rilpivirine; RTV = ritonavir; TPV/r = tipranavir/ritonavir