

Antidepressant Treatment Selector

Charts revised December 2023. Full information available at www.hiv-druginteractions.org

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	ATV/c	ATV/r	DRV/c	DRV/r	LPV/r	DOR	EFV	ETV	NVP	RPV oral	FTR	LEN	MVC	BIC/ F/TAF	CAB oral	CAB/ RPV	DTG	EVG/c/ F/TAF	EVG/c/ F/TDF	RAL	FTC/ TAF	FTC/ TDF
Selective Serotonin	Reupta	ke Inhil	bitors			_				Oral				ITIAI	orar	IXI V		I/IAI	17101		IAI	101
Citalopram	↑ ♥	↑ ♥	1	1	↑ ♥	\leftrightarrow	↓ ♥	↓	1	$\leftrightarrow \Psi$	↔ ♥	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	↔ ♥	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Escitalopram	↑ ♥	↑ ♥	1	1	↑ ♥	\leftrightarrow	↓ ♥	↓	↓	↔ ♥	↔ ♥	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	↔ ♥	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Fluoxetine	1	1	1	1	1	\leftrightarrow	↔ ♥	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Fluvoxamine	1	1	1	1	1	\leftrightarrow	↔ ♥	\leftrightarrow	Λ	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Paroxetine	↑ ↓?	↑↓?	↑ ↓?	↓39%	↑ ↓?	\leftrightarrow	$\leftrightarrow \Psi$	↑3%	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	↑ ↓?	↑↓?	\leftrightarrow	\leftrightarrow	\leftrightarrow
Sertraline	1	↓?	1	↓49%	1	\leftrightarrow	↓39%	J	J	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	↓7%	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow
Serotonin and Nore	pinephr	ine Reu	ıptake l	Inhibito	rs																	
Desvenlafaxine	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow
Duloxetine	1	↑↓	1	↑↓	↑↓	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Milnacipran	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow
Venlafaxine	↑ ♥	↑ ♥	1	1	↑ ♥	\leftrightarrow	↓ ♥	\downarrow	\downarrow	$\leftrightarrow \Psi$	↔ ♥	\leftrightarrow	₩	\leftrightarrow	\leftrightarrow	↔ ♥	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Tricylic Antidepress	sants										•										•	
Amitriptyline	↑ ♥	↑ ♥	1	1	↑ ♥	\leftrightarrow	$\leftrightarrow \Psi$	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Clomipramine	↑♥	↑ ♥	↑ a	↑ a	↑♥	\leftrightarrow	↓ ♥	↓	\downarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	↑ a	↑ a	\leftrightarrow	\leftrightarrow	\leftrightarrow
Desipramine	↑♥	↑ ♥	1	1	↑5% ♥	\leftrightarrow	$\leftrightarrow \Psi$	\leftrightarrow	\leftrightarrow	$\leftrightarrow \Psi$	$\leftrightarrow \Psi$	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	$\leftrightarrow \Psi$	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Doxepin	1	1	1	1	1	\leftrightarrow	$\leftrightarrow \Psi$	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Imipramine	↑ ♥	↑ ♥	↑ b	↑ b	↑ ♥	\leftrightarrow	↓ ♥	↓	↓	↔ ♥	$\leftrightarrow \Psi$	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	↔ ♥	\leftrightarrow	↑b	↑ b	\leftrightarrow	\leftrightarrow	\leftrightarrow
Nortriptyline	↑ ♥	↑ ♥	1	1	↑ ♥	\leftrightarrow	↔ ♥	\leftrightarrow	\leftrightarrow	↔ ♥	$\leftrightarrow \Psi$	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	↔ ♥	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Trimipramine	↑ ♥	↑ ♥	1	1	↑ ♥	\leftrightarrow	$\leftrightarrow $	\leftrightarrow	\leftrightarrow	↔ ♥	↔ ♥	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	↔ ♥	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Tetracylic Antidepre	essants			_	_						_			_		_		_	_		_	_
Maprotiline	↑♥	↑ ♥	1	1	↑♥	\leftrightarrow	↔ ♥	\leftrightarrow	\leftrightarrow	↔ ♥	↔ ♥	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	↔ ♥	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Mianserin	↑ ♥	↑♥	1	1	↑♥	\leftrightarrow	↓ ♥	\downarrow	↓	$\leftrightarrow \Psi$	↔ ♥	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	↔ ♥	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Other																						
Agomelatine	\leftrightarrow	\downarrow	\leftrightarrow	1	\downarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow
Bupropion	\leftrightarrow	↓	\leftrightarrow	1	↓57%	\leftrightarrow	↓55%	\leftrightarrow	↓	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	†?	↑?	\leftrightarrow	\leftrightarrow	\leftrightarrow
Lamotrigine	↔ C	↓32%	\leftrightarrow	↓	↓50%	\leftrightarrow	\downarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	↓1%	\leftrightarrow	\leftrightarrow
Mirtazapine	↑♥	↑ ♥	1	1	↑♥	\leftrightarrow	↓ ♥	\downarrow	↓	↔ ♥	↔ ♥	1	\leftrightarrow	\leftrightarrow	\leftrightarrow	↔ ♥	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Nefazodone	1	1	1	1	1	1	↓ 1	↓ſì	↓ſî	1	1	↑ ↑	î	ſîd	\leftrightarrow	1	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Phenelzine	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow
Reboxetine	1	1	1	1	1	\leftrightarrow	\downarrow	\downarrow	↓	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
St John's wort	↓ e	↓ e	↓ e	↓ e	Џе	↓ e	↓ e	↓ e	↓ e	↓ e	↓ e	↓ e	↓ e	↓ e,f	\leftrightarrow	↓ e	↓ g	↓ e	↓ e	↓ ?	↓ e,h	\leftrightarrow
Tranylcypromine	1	1	1	1	1	\leftrightarrow	↓	\downarrow	1	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Trazodone	↑ ♥	↑ ♥	1	1	↑♥	\leftrightarrow	↓ ♥	↓	1	\leftrightarrow	\leftrightarrow	1	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	1	1	\leftrightarrow	\leftrightarrow	\leftrightarrow
Vortioxetine	↑	+	↑	↑	↑	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow	\leftrightarrow		*	\leftrightarrow	\leftrightarrow	\leftrightarrow

Interactions with CAB/RPV long acting injections

Pharmacokinetic interactions shown are mostly with RPV.

QT interactions shown are with RPV. Interactions with Lenacapavir

Residual LEN may affect exposure of sensitive CYP3A4 substrates

initiated within 9 months after stopping subcutaneous LEN.

Interactions with Ibalizumab

None

Interactions with Abacavir (ABC), Lamivudine (3TC), Tenofovir-DF (TDF) or Zidovudine (ZDV)

ABC: No clinically relevant interactions expected.

3TC: No clinically relevant interactions expected.

TDF: No clinically relevant interactions expected.

ZDV: No clinically relevant interactions expected.

Colour Legend

No clinically significant interaction expected.

These drugs should not be coadministered.

Potential interaction which may require a dose adjustment or close monitoring.

Potential interaction predicted to be of weak intensity. No a priori dosage adjustment is recommended.

Text Legend

- Potential increased exposure of the antidepressant
- Potential decreased exposure of the antidepressant
- No significant effect
- One or both drugs may cause QT and/or PR prolongation. ECG monitoring is advised if coadministered with atazanavir or lopinavir.

 Efavirenz has a potential risk of QT prolongation relating specifically to homozygous carriers of CYP2B6*6/*6.

 Rilpivirine and fostemsavir were shown to prolong the QT interval at supratherapeutic doses. Caution is advised with rilpivirine. ECG monitoring is advised with fostemsavir and drugs with a known QT prolongation risk.

1 Potential increased exposure of HIV drug

↓ Potential decreased exposure of HIV drug

Numbers refer to increase or decrease in AUC as observed in drug-drug interaction studies

Notes

- Coadministration may increase clomipramine concentrations. Use with caution as clomipramine has been shown to prolong the QT interval.
- Coadministration may increase imipramine concentrations. Use with caution as imipramine has been shown to prolong the QT interval
- The US product label for atazanavir/cobicistat mentions that the effect on lamotrigine concentrations is unknown and recommends monitoring of lamotrigine concentrations.
- No effect on emtricitabine or tenofovir alafenamide is expected, but coadministration may increase bictegravir. This increase is unlikely to be clinically significant.
- A study suggests a low risk of a clinically relevant pharmacokinetic interaction with low-hyperforin formulations (<1 mg/day) of St John's Wort (hyperforin is the constituent responsible for induction of CYPs and P-gp). Coadministration may be considered with St John's Wort formulations that clearly state the hyperforin content and which have a total daily hyperforin dose of 1 mg or less.
- No effect on emtricitabine is expected, but coadministration may decrease bictegravir and tenofovir alafenamide concentrations which may result in loss of therapeutic effect and development of resistance.
- The US Prescribing Information recommends that coadministration should be avoided as there are insufficient data to make dosing recommendations. However, the European SPC suggests dolutegravir be dosed at 50 mg twice daily, but recommends alternative combinations to be used where possible in INSTI-resistant patients.
- No effect on emtricitabine is expected, but tenofovir alafenamide concentrations may decrease which may result in loss of therapeutic effect and development of resistance

Abbreviations ATV atazanavir DRV darunavir LPV lopinavir /c cobicistat /r ritonavir DOR doravirine EFV efavirenz ETV etravirine NVP nevirapine RPV rilpivirine FTR fostemsavir LEN lenacapavir MVC maraviroc BIC bictegravir CAB cabotegravir DTG dolutegravir EVG elvitegravir RAL raltegravir F or FTC emtricitabine TAF tenofovir alafenamide TDF tenofovir-DF