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UNIVERSITY OF LIVERPOOL

Interaction Report

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Antiretroviral Treatment	Co-medications
_ZZDarunavir Ritonavir (RTV)	Sildenafil (Erectile Dysfunction)

This report lists the summaries of potential interactions (i.e. "red", "amber" and “yellow” classifications) for the drugs in the table above.

Interactions with a "green" or "grey" classification (i.e. no clinically significant interaction or no clear data) have been checked and are listed at the end of this report, but summaries are not shown.

For full details of all interactions, see www.hiv-druginteractions.org .

Description of the interactions

Potential clinically significant interaction - likely to require additional monitoring, alteration of drug dosage or timing of administration (AMBER)

Ritonavir (RTV) + Sildenafil (Erectile Dysfunction)
Coadministration is contraindicated in pulmonary arterial hypertension patients. Coadministration substantially increases sildenafil concentrations and may increase sildenafil-associated adverse events. Coadministration of sildenafil (100 mg single dose) and ritonavir (500 mg twice daily) increased sildenafil AUC by 11-fold and Cmin by 4-fold. Coadministration is not recommended, but if given sildenafil should not exceed a maximum single dose of 25 mg in a 48-hour period.

_ZZDarunavir + Ritonavir (RTV)
Darunavir should only be used in combination with 100 mg of ritonavir as a pharmacokinetic enhancer. Increasing the dose of ritonavir did not significantly affect darunavir concentrations and is not recommended.

_ZZDarunavir + Sildenafil (Erectile Dysfunction)
Note: this interaction was studied using a darunavir/ritonavir dose lower than that licensed. Coadministration of darunavir/ritonavir (400/100 mg twice daily) and a single dose of sildenafil (25 mg) resulted in comparable exposure to 100 mg sildenafil alone. If coadministration is indicated, sildenafil at a single dose not exceeding 25 mg in 48 hours can be used with increased monitoring for PDE-5 inhibitor associated adverse events.