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UNIVERSITY OF LIVERPOOL

Interaction Report

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Antiretroviral Treatment	Comedications
Ritonavir (RTV)	Fluticasone

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

Drugs that should not be coadministered (RED)

Ritonavir (RTV) + Fluticasone
Coadministration is not recommended unless the potential benefit to the patient outweighs the risk of systemic corticosteroid side effects. Coadministration of fluticasone nasal spray (200 µg once daily) and ritonavir (100 mg twice daily) increased fluticasone AUC by ~350-fold and Cmax by ~25-fold. The significant increase in fluticasone exposure resulted in a significant decrease (86%) in plasma cortisol AUC. Systemic corticosteroid effects, including Cushing's syndrome and adrenal suppression have been reported. A dose reduction of fluticasone should be considered with close monitoring of local and systemic effects or a switch to a glucocorticoid, which is not a substrate for CYP3A4 (e.g., beclometasone). Moreover, in case of withdrawal of glucocorticoids progressive dose reduction may be required over a longer period.

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