

↑ Potential increased exposure of HIV drug

## **Calcium Channel Blockers 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/TDF	RAL	FTC/ TAF	FTC/ TDF
Calcium Channel Blockers																						
Amlodipine	↑ ♥	↑♥	1	1	<b>↑</b> ♥	$\leftrightarrow$	<b>↓</b>	<b>↓</b>	<b>↓</b>	$\leftrightarrow$	$\leftrightarrow$	1	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$	1	1	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$
Diltiazem	↑♥	↑♥	1	1	↑♥	ſ	↓69% <b>▼</b>	↓ 11	<b>↓</b>	îΨ	îv	1	î	ſîa	$\leftrightarrow$	îv	$\leftrightarrow$	1	1	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$
Felodipine	↑ ♥	<b>↑</b> ♥	1	1	<b>↑</b> ♥	$\leftrightarrow$	<b>↓</b>	<b>1</b>	<b>↓</b>	$\leftrightarrow$	$\leftrightarrow$	1	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$	1	1	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$
Lacidipine	↑ ♥	<b>↑</b> ♥	1	1	<b>↑</b> ♥	$\leftrightarrow$	↓ ♥	<b>1</b>	<b>↓</b>	↔ ♥	$\leftrightarrow \Psi$	1	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$	↔ ♥	$\leftrightarrow$	1	1	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$
Lercanidipine	1	1	1	1	1	$\leftrightarrow$	<b>↓</b>	<b>1</b>	<b>↓</b>	$\leftrightarrow$	$\leftrightarrow$	1	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$	1	1	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$
Nicardipine	↑ ♥	<b>↑</b> ♥	1	1	<b>↑</b> ♥	<b>1</b>	↓ ♥	↓ 11	$\downarrow$	îΨ	îv	1	î	$\leftrightarrow$	$\leftrightarrow$	îv	$\leftrightarrow$	1	1	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$
Nifedipine	↑ ♥	<b>↑</b> ♥	1	1	↑♥	$\leftrightarrow$	<b>\</b>	1	<b>↓</b>	$\leftrightarrow$	$\leftrightarrow$	1	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$	1	1	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$
Nisoldipine	↑ ♥	↑♥	1	1	↑♥	$\leftrightarrow$	<b>\</b>	1	$\downarrow$	$\leftrightarrow$	$\leftrightarrow$	1	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$	1	1	$\leftrightarrow$	$\leftrightarrow$	$\leftrightarrow$
Verapamil	↑♥	<b>↑♥</b>	1	1	↑♥	î	$\downarrow$	↓ 11	$\downarrow$	ſ	ſ	1	î	ſîb	$\leftrightarrow$	<b>1</b>	$\leftrightarrow$	↑ <b>1</b> c	↑ <b>↑</b> d	$\leftrightarrow$	11 c	↑ d

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

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: Verapamil could potentially increase absorption of tenofovir-DF (d).

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 antihypertensive
- Potential decreased exposure of the antihypertensive
- → 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.
  Rilipivirine 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.

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

## Notes

- a Coadministration may increase bictegravir concentrations; no effect on emtricitabine or tenofovir alafenamide is expected.
- b Coadministration may increase bictegravir and tenofovir alafenamide concentrations; no effect on emtricitabine is expected.
- c Coadministration could potentially increase the absorption of tenofovir alafenamide, thereby increasing the systemic concentration of tenofovir.
- d Coadministration could potentially increase the absorption of tenofovir-DF, thereby increasing the systemic concentration of tenofovir. Monitoring of tenofovir-associated adverse reactions, including frequent renal monitoring, is recommended.

Abbreviations ATV atazanavir bTV darunavir LEN lenacapavir MVC maraviroc BIC bictegravir CAB cabotegravir DTG dolutegravir bTG fostemsavir bTG for the formal state of the following states and the following states are also and the following states are always are always and the following states are always are always and the following states are always are always and the following states ar