

**ACID SUPPRESSING DRUGS:**  
**ANTACIDS, H2-RECEPTOR ANTAGONISTS, PROTON PUMP INHIBITORS**

	INSTIs	NNRTIs		PIs	
	<ul style="list-style-type: none"> <li>• BICTEGRAVIR (<i>Biktarvy</i>)</li> <li>• DOLUTEGRAVIR (<i>Tivicay, Trumeq, Juluca</i>)</li> <li>• ELVITEGRAVIR/COBICISTAT (<i>Stribild, Genvoya</i>)</li> <li>• RALTEGRAVIR (<i>Isentress</i>)</li> </ul>	<ul style="list-style-type: none"> <li>• RILPIVIRINE (<i>Edurant, Complera, Odefsey, Juluca</i>)</li> </ul>	<ul style="list-style-type: none"> <li>• DORAVIRINE (<i>Pifeltro, Delstrigo</i>)</li> <li>• EFAVIRENZ (<i>Sustiva, Atripla</i>)</li> <li>• ETRAVIRINE (<i>Intelece</i>)</li> <li>• NEVIRAPINE (<i>Viramune</i>)</li> </ul>	Boosted with ritonavir (Norvir) or cobicistat <ul style="list-style-type: none"> <li>• ATAZANAVIR (<i>Reyataz, Evotaz</i>)</li> </ul>	Boosted with ritonavir (Norvir) or cobicistat <ul style="list-style-type: none"> <li>• DARUNAVIR (<i>Prezista, Prezcobix, Symtuza</i>)</li> <li>• LOPINAVIR (<i>Kaletra</i>)</li> </ul>

**ANTACIDS CONTAINING MAGNESIUM, ALUMINUM OR CALCIUM**

<ul style="list-style-type: none"> <li>• Antacids (<i>Tums, Maalox, Mylanta, Gaviscon</i>)</li> </ul>	↓ INSTI	↓ rilpivirine		↓ atazanavir	
	Raltegravir 600 mg HD tablets				
	Raltegravir 400 mg OK with calcium				

**H2 RECEPTOR ANTAGONISTS**




<ul style="list-style-type: none"> <li>• Famotidine (<i>Pepcid</i>), nizatidine (<i>Axid</i>), ranitidine (<i>Zantac</i>)</li> </ul>		↓ rilpivirine		↓ atazanavir	
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**PROTON PUMP INHIBITORS (PPIs)**

<ul style="list-style-type: none"> <li>• Esomeprazole (<i>Nexium</i>), lansoprazole (<i>Prevacid</i>), omeprazole (<i>Losec</i>), pantoprazole (<i>Pantoloc</i>), rabeprazole (<i>Pariet</i>)</li> </ul>		↓ rilpivirine		↓ atazanavir with low dose PPI	
				↓↓ atazanavir with high dose PPI	

**Mechanism of Drug Interactions, Management and Monitoring**

Acid Suppressing Drugs	Mechanism of Interaction	Management
<b>Antacids</b>	<b>Integrase Inhibitors:</b> chelation leading to poor absorption	<b>Bictegravir:</b> Take bictegravir 2 hours before or after medications or supplements containing polyvalent cations. If given with food, may be taken at same time as calcium and iron supplements. <b>Dolutegravir:</b> Administer 2 hours before or 6 hours after medications containing polyvalent cations (Mg, Al, Fe or Ca) including antacids or laxatives, sucralfate, oral iron or calcium supplements and buffered medications. If given with food, may be taken at same time as calcium and iron supplements. <b>Elvitegravir:</b> Separate by at least 2 hours from antacids containing Al, Mg or Ca. <b>Raltegravir:</b> Do not coadminister with Mg or Al containing antacids. Calcium-containing antacids may be coadministered with raltegravir 400 mg tablets, but not 600 mg HD tablets.
	<b>Atazanavir:</b> increase in gastric pH leads to poor absorption	<b>Atazanavir:</b> administer 2 hours before or 1 hour after antacids.
	<b>Rilpivirine:</b> increase in gastric pH leads to poor absorption	<b>Rilpivirine:</b> Administer antacids at least 2 hours before or 4 hours after rilpivirine.
<b>H<sub>2</sub>RAs</b>	<b>Atazanavir:</b> increase in gastric pH leads to poor absorption	<b>Atazanavir:</b> Give simultaneously with or 10 hours after H <sub>2</sub> RA. If also on tenofovir-containing regimen increase to atazanavir 400 mg and ritonavir 100 mg in experienced patients.
	<b>Rilpivirine:</b> increase in gastric pH leads to poor absorption	<b>Rilpivirine:</b> Give rilpivirine 4 hours before or 12 hours after H <sub>2</sub> RA.
<b>Proton Pump Inhibitors</b>	<b>Atazanavir, rilpivirine:</b> increase in gastric pH leads to poor absorption	<b>Atazanavir:</b> Coadministration with omeprazole 40 mg (or equivalent) is contraindicated. If unavoidable, increase atazanavir dose to 400 mg with 100 mg of ritonavir and do not exceed doses of omeprazole 20mg or comparable. <b>Rilpivirine:</b> contraindicated with PPIs.

Legend:	 No dose adjustment required.
	 Use combination with caution. Adjustment in drug dose or frequency or additional/more frequent monitoring may be required. May wish to consult with a pharmacist knowledgeable in HIV drug interactions.
	 Contraindicated/avoid combination.

A MANAGEMENT TOOL FOR **HIV** DRUG-DRUG INTERACTIONS

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