CARDIOVASCULAR DRUGS:
STATINS AND LIPID LOWERING AGENTS

	INSTIs		NNRTIs		PIs
	• BICTEGRAVIR *(Biktarvy)* • DOLUTEGRAVIR *(Tivicay, Triumeq, Juluca)* • RALTEGRAVIR *(Isentress)*	• ELVITEGRAVIR/ COBICISTAT *(Stribild, Genvoya)*	• DORAVIRINE *(Pifeltro, Delstrigo)* • RILPIVIRINE *(Edurant, Complera, Odefsey, Juluca)*	• EFAVIRENZ *(Sustiva, Atripla)* • ETRAVIRINE *(Intelence)* • NEVIRAPINE *(Viramune)*	Boosted with ritonavir (Norvir) or cobicistat • ATAZANAVIR *(Reyataz, Evotaz)* • DARUNAVIR *(Prezista, Prezcobix, Symtuza)* • LOPINAVIR *(Kaletra)*
STATINS					
• Atorvastatin *(Lipitor)*		Potential for ↑ statin		Potential for ↓ statin	Potential for ↑ statin. Use lowest statin dose possible (maximum 20 mg atorvastatin daily).
• Rosuvastatin *(Crestor)*					Potential for ↑ statin. Use lowest statin dose possible (maximum 10 mg rosuvastatin daily).
• Pitavastatin *(Livalo)*					
• Pravastatin *(Pravachol)*		Potential for ↑ statin			Potential for ↑ statin
• Lovastatin *(Mevacor)*, simvastatin *(Zocor)*		Potential for ↑ statin and toxicity		Potential for ↓ statin	Potential for ↑ statin and toxicity

	INSTIs		NNRTIs		PIs
	• BICTEGRAVIR *(Biktarvy)* • DOLUTEGRAVIR *(Tivicay, Triumeq, Juluca)* • RALTEGRAVIR *(Isentress)*	• ELVITEGRAVIR/ COBICISTAT *(Stribild, Genvoya)*	• DORAVIRINE *(Pifeltro, Delstrigo)* • RILPIVIRINE *(Edurant, Complera, Odefsey, Juluca)*	• EFAVIRENZ *(Sustiva, Atripla)* • ETRAVIRINE *(Intelence)* • NEVIRAPINE *(Viramune)*	Boosted with ritonavir (Norvir) or cobicistat • ATAZANAVIR *(Reyataz, Evotaz)* • DARUNAVIR *(Prezista, Prezcobix, Symtuza)* • LOPINAVIR *(Kaletra)*
FIBRATES					
• Fenofibrate, bezafibrate, gemfibrozil					
CHOLESTEROL ABSORPTION INHIBITOR					
• Ezetimibe *(Ezetrol)*					
GASTROINTESTINAL LIPASE INHIBITOR					
• Orlistat *(Xenical)*	Potential for ↓ ARV absorption				
BILE ACID SEQUESTRANTS					
• Cholestyramine *(Olestyr)*, colestipol *(Colestid)*	Potential for ↓ ARV absorption				

Mechanism of Drug Interactions, Management and Monitoring

	Mechanism of Interaction	Main Interacting ARVs	Management	Monitoring
Hmg-Coa Reductase Inhibitors (Statins)				
Lovastatin, simvastatin	Inhibition of CYP3A4	Ritonavir and cobicistat-boosted protease inhibitors and elvitegravir	Contraindicated. Use alternate statin.	Statin toxicity: myalgia, rhabdomyolysis
Atorvastatin, rosuvastatin, pravastatin	Inhibition of CYP3A4, OATP1B1, BCRP	Ritonavir and cobicistat-boosted protease inhibitors and elvitegravir	Use lowest statin dose possible and titrate to effect	Statin toxicity: myalgia, rhabdomyolysis
Pitavastatin	Primarily cleared via UGT, OATP1B1	None	Most ARVs may be used	Statin toxicity: myalgia, rhabdomyolysis
Orlistat	Reduced absorption of ARVs by decreasing dietary fat absorption	All antiretrovirals, particularly lipophilic agents	Take ARVs at least 2 hours before/after orlistat	Antiretroviral efficacy
Bile acid sequestrants	Reduced absorption of ARVs	All antiretrovirals	Take ARVs either 1 hour before or 4-6 hours after bile acid sequestrants	Antiretroviral efficacy

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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