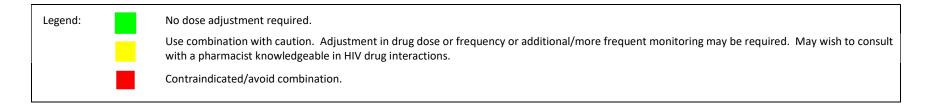
## **MISCELLANEOUS DRUGS:**

## **COLCHICINE AND ERGOT ALKALOIDS**

	INSTIS		NNRTIS		Pls
	<ul> <li>BICTEGRAVIR (Biktarvy)</li> <li>DOLUTEGRAVIR (Tivicay, Triumeq, Juluca)</li> <li>RALTEGRAVIR (Isentress)</li> </ul>	COBICISTAT (Stribild,	<ul> <li>DORAVIRINE (Pifeltro, Delstrigo)</li> <li>RILPIVIRINE (Edurant, Complera, Odefsey, Juluca)</li> </ul>	Atripla)	Boosted with ritonavir (Norvir) or cobicistat  • ATAZANAVIR (Reyataz, Evotaz)  • DARUNAVIR (Prezista, Prezcobix, Symtuza)  • LOPINAVIR (Kaletra)
COLCHICINE					
• Colchicine (various generics)		Potential for ↑ colchicine  Combination  contraindicated in renal  or hepatic impairment		Potential for ↓ colchicine	Potential for ↑ colchicine  Combination contraindicated in renal or hepatic impairment
ERGOT ALKALOIDS					
<ul> <li>dihydroergotamine, ergonovine, ergotamine, methylergonovine (Cafergot, Migranal, D.H.E. 45, Ergotrate, Methergine, Migergot, Ergomar)</li> </ul>		Potential for ↑ ergot		Potential for ↓ ergot	Potential for ↑ ergot



## Mechanism of Drug Interactions, Management and Monitoring

	Mechanism of Interaction	Main Interacting ARVs	Management	Monitoring
Colchicine	Inhibition of P-gp, CYP3A4	Ritonavir and cobicistat- boosted protease inhibitors and elvitegravir	Adjust colchicine dose and monitor for toxicity.  For treatment of gout flares: use colchicine 0.6 mg x 1 dose, followed by 0.3 mg 1 hour later. Do not repeat dose for at least 3 days. For prophylaxis of gout flares: use colchicine 0.3 mg once daily or every other day.  For treatment of familial Mediterranean fever: Do not exceed colchicine 0.6 mg once daily or 0.3 mg BID.  Combination is contraindicated in patients with renal or hepatic impairment. Lifethreatening and fatal colchicine toxicity has been reported in such situations	Colchicine toxicity: diarrhea, cramping, nausea, abdominal pain, vomiting, peripheral leukocytosis.  Life-threatening complications associated with overdose include multi-organ failure, respiratory depression, and cardiovascular collapse
	Induction of P-gp, CYP3A4	NNRTIs efavirenz, etravirine, nevirapine	Consider switching to non-inducing NNRTI such as doravirine or rilpivirine if possible.  Do not exceed maximum recommended dose of colchicine:  Gout flares: 1.8 mg over 1 hour period Familial Mediterranean fever: 2.4 mg daily	Colchicine efficacy and toxicity
Ergot alkaloids	Inhibition of CYP3A4	Ritonavir and cobicistat- boosted protease inhibitors and elvitegravir	Coadministration is contraindicated	Ergot toxicity: arterial vasoconstriction, peripheral vascular ischemia, gangrene
	Induction of CYP3A4	NNRTIs efavirenz, etravirine, nevirapine	Consider switching to non-inducing NNRTI such as doravirine or rilpivirine if possible.  Do not exceed maximum recommended dose of ergot alkaloid	Ergot efficacy and toxicity