









# HCV Directly Acting Antivirals & RBV

Charts revised November 2019. Full information available at [www.hep-druginteractions.org](http://www.hep-druginteractions.org)

**Please note that if a drug is not listed it cannot automatically be assumed it is safe to coadminister.**

DCV, Daclatasvir; EBR/GZR, Elbasvir/Grazoprevir; GLP/PIB, Glecaprevir/Pibrentasvir; LED, Ledipasvir; OBV/PTV/r + DSV, Ombitasvir/Paritaprevir/Ritonavir + Dasabuvir; SMV, Simeprevir; SOF, Sofosbuvir; VEL, Velpatasvir; VOX, Voxilaprevir; RBV, Ribavirin.

	DCV	EBR/GZR	GLP/PIB	LED/SOF	OBV/PTV/r	OBV/PTV/r+DSV	SMV	SOF	SOF/VEL	SOF/VEL/VOX	RBV
<b>Hypertension/Heart Failure Agents</b>											
Acebutolol	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Aliskiren	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ambrisentan	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Amiloride	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Azilsartan	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Benazepril	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Bendroflumethiazide	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Bosentan	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Bumetanide	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Candesartan	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Captopril	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Chlorothiazide	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Chlortalidone	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Cilazapril	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Clevidipine	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Clonidine	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Doxazosin	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Enalapril	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Eplerenone	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Epoprostenol	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Eprosartan	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fosinopril	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Furosemide	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Hydralazine	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Hydrochlorothiazide	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Iloprost	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Indapamide	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Irbesartan	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Isradipine	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ivabradine	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lacidipine	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lercanidipine	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lisinopril	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Losartan	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Macitentan	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Methylidopa	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Metolazone	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Moxonidine	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Olmесartan	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Perindopril	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Prazosin	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Quinapril	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ramipril	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ranolazine	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Rilmenidine	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Riociguat	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Selexipag	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Sildenafil	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Spironolactone	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Tadalafil	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Telmisartan	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Torasemide	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Trandolapril	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Treprostinil	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Valsartan	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Xipamide	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Zofenopril	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆

	DCV	EBR/GZR	GLP/PIB	LED/SOF	OBV/PTV/r	OBV/PTV/r+DSV	SMV	SOF	SOF/VEL	SOF/VEL/VOX	RBV
<b>Illicit/Recreational</b>											
Amphetamine	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Cannabis	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Cocaine	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ecstasy (MDMA)	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
GHB (Gamma-hydroxybutyrate)	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Heroin	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
LSD (Lysergic acid diethylamide)	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Mephedrone	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Methamphetamine	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Phencyclidine (PCP)	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>Immunosuppressants</b>											
Alemtuzumab	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Azathioprine	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Basiliximab	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Brodalumab	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ciclosporin	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ecilizumab	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Etanercept	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fingolimod	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lenalidomide	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Mycophenolate	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Pirfenidone	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Sirolimus	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Tacrolimus	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>Lipid Lowering Agents</b>											
Atorvastatin	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Bezafibrate	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ezetimibe	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fenofibrate	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fish oils	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fluvastatin	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Gemfibrozil	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lovastatin	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Pitavastatin	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Pravastatin	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Rosuvastatin	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆
Simvastatin	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆	◆

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**Key to symbols**

●	These drugs should not be coadministered
■	Potential clinically significant interaction that is likely to require additional monitoring, alteration of drug dosage or timing of administration
▲	Potential interaction likely to be of weak intensity. Additional action/monitoring or dosage adjustment is unlikely to be required
◆	No clinically significant interaction expected

**Notes**

- Further information is available at [www.hep-druginteractions.org](http://www.hep-druginteractions.org)
- Predicted interactions are based on known metabolic pathways and routes of clearance.
- Caution is required in patients with hepatic impairment as this may also increase drug levels and require dose modification.
- Where advice differs between countries, the charts reflect the more cautious option.

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 University of Liverpool, Pharmacology Research Labs,  
 1st Floor Block H, 70 Pembroke Place, LIVERPOOL, L69 3GF

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