

Antipsychotic Treatment Selector

Charts revised December 2018. Full information available at www.hiv-druginteractions.org

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	ATV/r	DRV/r	LPV/r	EFV	ETV	NVP	RPV	MVC	DTG	RAL	ABC	FTC	3TC	TDF	ZDV	E/C/F/TAF	E/C/F/TDF	
Atypical Antipsychotics	Amisulpride	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	
	Aripiprazole	↑	↑	↑	↓	↓	↓	↔	↔	↔	↔	↔	↔	↔	↔	↑	↑	
	Asenapine	↓	↓	↓	↓	↓	↓	↔	↔	↔	↔	↔	↔	↔	↔	↔	↑	↑
	Clozapine	↑ ^a	↑	↑ ^a	↓	↓	↓	↔ ^c	↔	↔	↔	↔	↔	↔	↔	↔ ^d	↑	↑
	Olanzapine	↓	↓	↓	↓	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
	Paliperidone	↑ ^a	↑	↑ ^a	↓	↓	↓	↔	↔	↔	↔	↔	↔	↔	↔	↔	↑	↑
	Quetiapine	↑ ^b	↑ ^b	↑ ^b	↓	↓	↓	↔ ^c	↔	↔	↔	↔	↔	↔	↔	↔ ^d	↑ ^b	↑ ^b
	Risperidone	↑	↑	↑	↓	↓	↓	↔	↔	↔	↔	↔	↔	↔	↔	↔	↑	↑
Phenothiazines	Chlorpromazine	↑ ^a	↑	↑ ^a	↔	↔	↔	↔ ^c	↔	↔	↔	↔	↔	↔	↔	↔ ^d	↑	↑
	Fluphenazine	↑ ^a	↑	↑ ^a	↔	↔	↔	↔ ^c	↔	↔	↔	↔	↔	↔	↔	↔ ^d	↑	↑
	Perphenazine	↑ ^a	↑	↑ ^a	↔	↔	↔	↔ ^c	↔	↔	↔	↔	↔	↔	↔	↔ ^d	↑	↑
	Pimozide	↑ ^a	↑	↑ ^a	↑	↓	↓	↔ ^c	↔	↔	↔	↔	↔	↔	↔	↔	↑	↑
	Prochlorperazine	↑ ^a	↑	↑ ^a	↔	↔	↔	↔ ^c	↔	↔	↔	↔	↔	↔	↔	↔ ^d	↑	↑
	Thioridazine	↑ ^a	↑	↑ ^a	↓	↓	↓	↓ ^c	↓	↔	↔	↔	↔	↔	↔	↔ ^d	↑	↑
Others	Haloperidol	↑ ^a	↑	↑ ^a	↓	↓	↓	↔ ^c	↑	↔	↔	↔	↔	↔	↔	↔	↑	↑
	Sulpiride	↔ ^a	↔	↔ ^a	↔	↔	↔	↔ ^c	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔

Colour Legend

- No clinically significant interaction expected.
- These drugs should not be coadministered.
- Potential interaction which may require a dosage 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 antipsychotic
- ↓ Potential decreased exposure of the antipsychotic
- ↔ No significant effect
- ↑ Potential increased exposure of HIV drug
- ↓ Potential decreased exposure of HIV drug

- a Both drugs can potentially prolong the QT interval, ECG monitoring recommended.
- b Coadministration contraindicated in the European SPC however US Prescribing Information recommends quetiapine should be reduced to one sixth of the original dose if coadministered with a potent CYP3A4 inhibitor. The charts reflect the more cautious option.
- c Rilpivirine's manufacturer recommends caution when coadministering with another drug susceptible to prolong QT interval as supratherapeutic dose of rilpivirine (75 and 300 mg once daily) were shown to prolong QT interval.
- d Potential haematological toxicity