### Corticosteroid Treatment Selector

Charts revised October 2021. Full information available at www.hiv-druginteractions.org

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| Inhaled | ATV/r | ATV/r | DRV/r | DRV/r | LPV/r | DOR | EFV | TDF | NVP | NVP | RPV | RPV | oral | DRV/r | DRV/r | DTG | EVG/c | EVG/c | FTC | TAF | FTC | TDF | TDF |
|---------|-------|-------|-------|-------|-------|-----|-----|-----|-----|-----|-----|-----|-----|------|------|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Beclometasone | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ |
| Budesonide | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ |
| Ciclesonide | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ |
| Flunisolide | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ |
| Fluticasone | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ |
| Mometasone | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ | ↑↑ |

### Abbreviations
- AT: Atazanavir
- DRV: Darunavir
- LPV: Lopinavir
- EFV: Efavirenz
- TDF: Tenofovir
- NVP: Nevirapine
- RPV: Rilpivirine
- DRV/r: Darunavir/ritonavir
- FTC/TDF: Emtricitabine/Tenofovir alafenamide
- EVG/c: EvAC
- TAF: Tenofovir alafenamide

### Notes
- Co-administration of trimoxacin (100 mg twice daily) increased the AUC of the active metabolite (beclometasone-17-monopropionate) by 108% but no significant effect on adrenal function was seen. Caution is still warranted, use the lowest possible corticosteroid dose and monitor for corticosteroid side effects.
- DRV/r decreased the AUC of active metabolite (beclometasone-17-monopropionate) by 11%, but no significant effect on adrenal function was seen.
- Risk of elevated corticosteroid levels, Cushings syndrome and adrenal suppression. This risk is present for oral and injected administration, and also for topical, inhaled or eye drop formulations.
- No dose adjustment required but monitor closely, especially for signs of Cushings syndrome when using a high dose or prolonged administration.
- Use the lowest possible flunisolide dose with monitoring for corticosteroid side effects.
- The extent of percutaneous absorption is determined by many factors such as degree of inflammation and alteration of the skin, duration, frequency and surface of application, and use of occlusive dressings.
- Betamethasone is a moderate inducer of CYP3A4 and could decrease HIV drug exposure and efficacy, particularly when administered orally or intravenously at high doses or for a long duration.
- If coadministration cannot be avoided, doravirine should be administered 100 mg twice daily (based on the interaction study with rifabutin, another moderate inducer) and maintained at this dose for at least another two weeks following cessation of the corticosteroid.
- No effect on emtricitabine or tenofovir alafenamide is expected, but bictegravir concentrations may decrease.