DAAs and Recreational Drugs

UNIVERSITY OF LIVERPOOL
TherEx

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	DCV	ELB/GZR	G/P	LED/SOF	OBV/PTV/r	OBV/PTV/r +DSV	RDV	SOF	SOF/VEL	SOF/VEL/VOX
Alprazolam	↔	↔	↔	↔	↑	↑ 34%	↔	↔	↔	↔
Amphetamine	↔	↔	↔	↔	↑ [a]	↑ [a]	↔	↔	↔	↔
Bromazolam	↔	↔	↔	↔	↑ [b]	↑ [b]	↔	↔	↔	↔
Buprenorphine	↔	↔	↔	↔	↑ 51%	↑ 107%	↔	↔	↔	↔
Cannabis	↔	↔	↔	↔	↑ [c]	↑ [c]	↔	↔	↔	↔
Carfentanil	↔ [d]	↑	↑	↔ [d]	↑	↑	↔ [d]	↔ [d]	↔ [d]	↔ [d]
Cocaine	↔	↔	↔	↔	↑ [e]	↑ [e]	↔	↔	↔	↔
Codeine	↔	↔	↔	↔	↓ [f]	↓ [f]	↔	↔	↔	↔
Diazepam	↔	↔	↔	↔	↓	↓ 22%	↔	↔	↔	↔
Ecstasy (MDMA)	↔	↔	↔	↔	↔ [g]	↔ [g]	↔	↔	↔	↔
Etizolam	↔	↑ [b]	↑ [b]	↔	↑ [b]	↑ [b]	↔	↔	↔	↔
Fentanyl (Recreational)	↔	↑ [b]	↑ [b]	↔	↑ [h]	↑ [h]	↔	↔	↔	↔
GHB (Gamma-hydroxybutyrate)	↔	↔	↔	↔	↑	↑	↔	↔	↔	↔
Heroin (Diamorphine)	↔	↔	↔	↔	↑	↑	↔	↔	↔	↔
Hydrocodone	↔	↔	↑	↔	↑	↑	↔	↔	↔	↔
Hydromorphone	↔	↔	↔	↔	↑	↑	↔	↔	↔	↔
Ketamine	↔	↔	↔	↔	↑ [i]	↑ [i]	↔	↔	↔	↔
LSD (Lysergic acid diethylamide)	↔	↔	↔	↔	↑ [j]	↑ [j]	↔	↔	↔	↔
Mephedrone	↔	↔	↔	↔	↔ [k]	↔ [k]	↔	↔	↔	↔
Methadone	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
Methamphetamine	↔	↔	↔	↔	↔ [a]	↔ [a]	↔	↔	↔	↔
Methaqualone	↔	↑ [b]	↑ [b]	↔	↑	↑	↔	↔	↔	↔
Midazolam (oral)	↔	↑	↔	↔	↑	↑	↔	↔	↔	↔
Morphine	↔	↔	↔	↔	↑	↑	↔	↔	↔	↔
Naloxone	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
Nitazenes	↔	↑ [b]	↑ [b]	↑ [b]	↑	↑	↑ [b]	↔	↔	↔
Nitrous oxide	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
Oxycodone	↔	↑	↑	↔	↑	↑	↔	↔	↔	↔
Pethidine	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
Phencyclidine (PCP, angel dust)	↔	↔	↔	↔	↑ [l]	↑ [l]	↔	↔	↔	↔
Temazepam	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
Triazolam	↔	↔	↔	↔	↑	↑	↔	↔	↔	↔
Xylazine	⇑	↑⇑	↑⇑	↔	↑	↑	↔	↔	↔	↔

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.

Text Legend

↑ Potential increased exposure of the recreational drug
↓ Potential decreased exposure of the recreational drug
↔ No significant effect
⇑ Potential increased exposure of HCV DAA
⇓ Potential decreased exposure of HCV DAA

Numbers refer to increased or decreased AUC as observed in drug-drug interaction studies.

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a Caution is advised as dosing of recreational drugs can be variable.

b Patients should be advised to look out for increased adverse effects, such as sedation and respiratory depression.

c Coadministration may increase concentrations of THC (the psychoactive component of cannabis). The patient should be made aware of potential increased toxicity.

d A pharmacokinetic interaction is unlikely; however, multiple deaths have resulted from carfentanil use. Advise patients to avoid.

e Significance of any potential increase is unknown. Ensure the patient is aware of signs/symptoms of cocaine toxicity (tremor, seizures, anxiety, headache, increased body temperature).

f Potential opiate withdrawal and reduction of analgesic efficacy due to inhibition of conversion of codeine to morphine. Codeine levels may increase.

g Caution is advised as there have been fatalities reported in subjects taking ritonavir-boosted HIV protease inhibitors and ecstasy. Ensure patient is aware of signs/symptoms of ecstasy toxicity (increased body temperature, dehydration, dry mouth, tense jaw, teeth grinding).

h Recreational use should be avoided as serious, life-threatening, or fatal respiratory depression may occur. Patients should be aware that recreational use could be potentially fatal.

i Ensure the patient is aware of signs of ketamine toxicity such as respiratory depression, loss of consciousness, hallucinations.

j Coadministration could potentially increase LSD concentrations. Ensure the patient is aware of signs/symptoms of LSD toxicity (i.e. hallucinations, agitation, psychosis, flashbacks).

k Caution is advised as dosing of recreational drugs can be variable. Ensure the patient is aware of signs/symptoms of mephedrone toxicity (i.e., agitation, tachycardia, hypertension).

l Ensure the patient is aware of signs/symptoms of PCP toxicity (seizure, hypertension, increased body temperature).

Abbreviations: DCV Daclatasvir; ELB/GZR Elbasvir/Grazoprevir; G/P Glecaprevir/Pibrentasvir; LED Ledipasvir; OBV/PTV/r +DSV Ombitasvir/Paritaprevir/Ritonavir +Dasabuvir; RVD Ravidasvir; SOF Sofosbuvir; VEL Velpatasvir; VOX Voxilaprevir

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