

Interactions with HBV Treatment

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

ADV, Adefovir; ETV, Entecavir; LAM, Lamivudine; PEG IFN, Peginterferon; RBV, Ribavirin; TBV, Telbivudine; TAF, Tenofovir alafenamide; TDF, Tenofovir-DF.

Table with columns for drug classes (Anaesthetics & Muscle Relaxants, Analgesics, Anthelmintics, Antiarrhythmics, Antibacterials) and drug abbreviations (ADV, ETV, LAM, PEG IFN, RBV, TBV, TAF, TDF). Contains interaction symbols (red, orange, yellow, green diamonds).

Table with columns for drug classes (Antibacterials (continued), Anticoagulant, Antiplatelet & Fibrinolytic, Anticonvulsants) and drug abbreviations (ADV, ETV, LAM, PEG IFN, RBV, TBV, TAF, TDF). Contains interaction symbols (red, orange, yellow, green diamonds).

For personal use only. Not for distribution.

Key to symbols

Legend table mapping symbols (red circle, orange square, yellow triangle, green diamond) to interaction descriptions.

Notes

- Further information is available at 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.

© Liverpool Drug Interactions Group, University of Liverpool, Pharmacology Research Labs, 1st Floor Block H, 70 Pembroke Place, LIVERPOOL, L69 3GF. We aim to ensure that information is accurate and consistent with current knowledge and practice...

# Interactions with HBV Treatment

Charts revised February 2021. 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.**

ADV, Adefovir; ETV, Entecavir; LAM, Lamivudine; PEG IFN, Peginterferon; RBV, Ribavirin; TBV, Telbivudine; TAF, Tenofovir alafenamide; TDF, Tenofovir-DF.

	ADV	ETV	LAM	PEG IFN alpha-2a	PEG IFN alpha-2b	RBV	TBV	TAF	TDF
<b>Antidepressants</b>									
Agomelatine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Amitriptyline	◆	◆	◆	◆	◆	◆	◆	◆	◆
Bupropion	◆	◆	◆	◆	◆	◆	◆	◆	◆
Citalopram	◆	◆	◆	◆	◆	◆	◆	◆	◆
Clomipramine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Desipramine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Desvenlafaxine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Dosulepin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Doxepin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Duloxetine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Escitalopram	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fluoxetine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fluvoxamine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Imipramine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lithium	◆	◆	◆	◆	◆	◆	◆	◆	◆
Maprotiline	◆	◆	◆	◆	◆	◆	◆	◆	◆
Mianserin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Milnacipran	◆	◆	◆	◆	◆	◆	◆	◆	◆
Mirtazapine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Moclobemide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Nefazodone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Nortriptyline	◆	◆	◆	◆	◆	◆	◆	◆	◆
Paroxetine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Sertraline	◆	◆	◆	◆	◆	◆	◆	◆	◆
Tianeptine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Trazodone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Trimipramine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Venlafaxine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Vortioxetine	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>Antidiabetics</b>									
Acarbose	◆	◆	◆	◆	◆	◆	◆	◆	◆
Albiglutide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Alogliptin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Canagliflozin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Dapagliflozin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Dulaglutide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Empagliflozin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Exenatide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Glibenclamide (Glyburide)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Gliclazide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Glimepiride	◆	◆	◆	◆	◆	◆	◆	◆	◆
Glipizide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Insulin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Linagliptin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Liraglutide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lixisenatide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Metformin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Nateglinide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Pioglitazone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Repaglinide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Rosiglitazone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Saxagliptin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Sitagliptin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Tolbutamide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Vildagliptin	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>Antifungals</b>									
Amphotericin B	◆	◆	◆	◆	◆	◆	◆	◆	◆
Anidulafungin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Caspofungin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fluconazole	◆	◆	◆	◆	◆	◆	◆	◆	◆
Flucytosine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Griseofulvin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Isavuconazole	◆	◆	◆	◆	◆	◆	◆	◆	◆
Itraconazole	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ketoconazole	◆	◆	◆	◆	◆	◆	◆	◆	◆
Miconazole	◆	◆	◆	◆	◆	◆	◆	◆	◆
Nystatin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Posaconazole	◆	◆	◆	◆	◆	◆	◆	◆	◆
Terbinafine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Voriconazole	◆	◆	◆	◆	◆	◆	◆	◆	◆

	ADV	ETV	LAM	PEG IFN alpha-2a	PEG IFN alpha-2b	RBV	TBV	TAF	TDF
<b>Antihistamines</b>									
Astemizole	◆	◆	◆	◆	◆	◆	◆	◆	◆
Bilastine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Cetirizine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Chlorphenamine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Desloratadine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Diphenhydramine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Doxylamine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ebastine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fexofenadine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Hydroxyzine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Levocetirizine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Loratadine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Promethazine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Terfenadine	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>Antimigraine Agents</b>									
Almotriptan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Dihydroergotamine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Eletriptan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ergotamine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Frovatriptan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Methylergonovine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Naratriptan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Pizotifen	◆	◆	◆	◆	◆	◆	◆	◆	◆
Rizatriptan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Sumatriptan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Zolmitriptan	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>Antiprotozoals</b>									
Amodiaquine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Artemether	◆	◆	◆	◆	◆	◆	◆	◆	◆
Artemisinin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Artesunate	◆	◆	◆	◆	◆	◆	◆	◆	◆
Atovaquone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Chloroquine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Dihydroartemisinin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Doxycycline	◆	◆	◆	◆	◆	◆	◆	◆	◆
Halofantrine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Hydroxychloroquine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lumefantrine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Mefloquine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Pentamidine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Primaquine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Proguanil	◆	◆	◆	◆	◆	◆	◆	◆	◆
Pyrimethamine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Quinine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Sodium stibogluconate	◆	◆	◆	◆	◆	◆	◆	◆	◆
Sulfadoxine	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>Antipsychotics/Neuroleptics</b>									
Amisulpride	◆	◆	◆	◆	◆	◆	◆	◆	◆
Aripiprazole	◆	◆	◆	◆	◆	◆	◆	◆	◆
Asenapine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Chlorpromazine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Chlorprothixene	◆	◆	◆	◆	◆	◆	◆	◆	◆
Clozapine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Flupentixol	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fluphenazine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Haloperidol	◆	◆	◆	◆	◆	◆	◆	◆	◆
Iloperidone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Levomepromazine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lurasidone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Olanzapine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Paliperidone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Perazine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Periciazine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Perphenazine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Pimozide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Pipotiazine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Prochlorperazine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Quetiapine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Risperidone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Sulpiride	◆	◆	◆	◆	◆	◆	◆	◆	◆
Thioridazine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Tiapride	◆	◆	◆	◆	◆	◆	◆	◆	◆
Trifluoperazine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ziprasidone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Zuclopentixol	◆	◆	◆	◆	◆	◆	◆	◆	◆

For personal use only. Not for distribution.

**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.

© Liverpool Drug Interactions Group,  
 University of Liverpool, Pharmacology Research Labs,  
 1st Floor Block H, 70 Pembroke Place, LIVERPOOL, L69 3GF  
 We aim to ensure that information is accurate and consistent with current knowledge and practice. However, the University of Liverpool and its servants or agents shall not be responsible or in any way liable for the continued currency of information in this publication whether arising from negligence or otherwise howsoever or for any consequences arising therefrom. The University of Liverpool expressly exclude liability for errors, omissions or inaccuracies to the fullest extent permitted by law.



# Interactions with HBV Treatment

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

ADV, Adefovir; ETV, Entecavir; LAM, Lamivudine; PEG IFN, Peginterferon; RBV, Ribavirin; TBV, Telbivudine; TAF, Tenofovir alafenamide; TDF, Tenofovir-DF.

	ADV	ETV	LAM	PEG IFN alfa-2a	PEG IFN alfa-2b	RBV	TBV	TAF	TDF
<b>Contraceptives and Hormone Replacements (continued)</b>									
Levonorgestrel (HRT)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Levonorgestrel (implant)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Levonorgestrel (IUD)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Levonorgestrel (POP)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Levonorgestrel/ ethinylestradiol (COC)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Medroxyprogesterone (depot)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Medroxyprogesterone (oral)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Medroxyprogesterone/ conjugated estrogens (HRT)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Medroxyprogesterone/ estradiol (HRT)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Norelgestromin/ethinylestradiol (patch)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Norethisterone (Norethindrone) (depot injection)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Norethisterone (Norethindrone) (POP)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Norethisterone (Norethindrone)/estradiol (HRT)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Norethisterone (Norethindrone)/ ethinylestradiol (COC)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Norethisterone (Norethindrone)/mestranol (COC)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Norgestimate/ethinylestradiol (COC)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Norgestrel/conjugated estrogens (HRT)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Norgestrel/ethinylestradiol (COC)	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>Erectile Dysfunction Agents</b>									
Sildenafil	◆	◆	◆	◆	◆	◆	◆	◆	◆
Tadalafil	◆	◆	◆	◆	◆	◆	◆	◆	◆
Vardenafil	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>Gastrointestinal Agents</b>									
Aluminium hydroxide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Alverine citrate	◆	◆	◆	◆	◆	◆	◆	◆	◆
Antacids	◆	◆	◆	◆	◆	◆	◆	◆	◆
Aprepitant	◆	◆	◆	◆	◆	◆	◆	◆	◆
Bisacodyl	◆	◆	◆	◆	◆	◆	◆	◆	◆
Cimetidine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Cisapride	◆	◆	◆	◆	◆	◆	◆	◆	◆
Cyclizine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Dantron	◆	◆	◆	◆	◆	◆	◆	◆	◆
Domperidone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Droperidol	◆	◆	◆	◆	◆	◆	◆	◆	◆
Esomeprazole	◆	◆	◆	◆	◆	◆	◆	◆	◆
Famotidine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Granisetron	◆	◆	◆	◆	◆	◆	◆	◆	◆
Hyoscine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ispaghula husk	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lactulose	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lansoprazole	◆	◆	◆	◆	◆	◆	◆	◆	◆
Linaclotide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Loperamide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lubiprostone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Macrogol	◆	◆	◆	◆	◆	◆	◆	◆	◆
Mebeverine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Mesalazine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Methylcellulose	◆	◆	◆	◆	◆	◆	◆	◆	◆
Metoclopramide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Naloxegol	◆	◆	◆	◆	◆	◆	◆	◆	◆
Omeprazole	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ondansetron	◆	◆	◆	◆	◆	◆	◆	◆	◆
Pantoprazole	◆	◆	◆	◆	◆	◆	◆	◆	◆
Prucalopride	◆	◆	◆	◆	◆	◆	◆	◆	◆
Rabeprazole	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ranitidine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Senna	◆	◆	◆	◆	◆	◆	◆	◆	◆
Simeticone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Sulfasalazine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Trimebutine	◆	◆	◆	◆	◆	◆	◆	◆	◆

For personal use only. Not for distribution.

	ADV	ETV	LAM	PEG IFN alfa-2a	PEG IFN alfa-2b	RBV	TBV	TAF	TDF
<b>HCC Therapies</b>									
Lenvatinib	◆	◆	◆	◆	◆	◆	◆	◆	◆
Pembrolizumab	◆	◆	◆	◆	◆	◆	◆	◆	◆
Regorafenib	◆	◆	◆	◆	◆	◆	◆	◆	◆
Sorafenib	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>Hepatitis B Drugs</b>									
Adefovir	◆	◆	◆	◆	◆	◆	◆	◆	◆
Entecavir	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lamivudine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Peginterferon alfa-2a	◆	◆	◆	n/a	n/a	◆	◆	◆	◆
Peginterferon alfa-2b	◆	◆	◆	n/a	n/a	◆	◆	◆	◆
Ribavirin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Telbivudine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Tenofovir alafenamide (TAF)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Tenofovir-DF	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>Hepatitis C Drugs (Direct Acting Antivirals)</b>									
Daclatasvir	◆	◆	◆	◆	◆	◆	◆	◆	◆
Elbasvir/Grazoprevir	◆	◆	◆	◆	◆	◆	◆	◆	◆
Glecaprevir/Pibrentasvir	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ledipasvir/Sofosbuvir	◆	◆	◆	◆	◆	◆	◆	◆	◆
OBV/PTV/r	◆	◆	◆	◆	◆	◆	◆	◆	◆
OBV/PTV/r + Dasabuvir	◆	◆	◆	◆	◆	◆	◆	◆	◆
Simeprevir	◆	◆	◆	◆	◆	◆	◆	◆	◆
Sofosbuvir (SOF)	◆	◆	◆	◆	◆	◆	◆	◆	◆
SOF/Velpatasvir	◆	◆	◆	◆	◆	◆	◆	◆	◆
SOF/Velpatasvir/Voxilaprevir	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>Herbals/Supplements/Vitamins</b>									
Aloe vera	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ascorbic acid (Vitamin C)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Black cohosh (A. racemosa)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Cat's claw (U. tomentosa)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Colecalciferol (Vitamin D3)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Cyanocobalamin (B12)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Diosmin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Echinacea	◆	◆	◆	◆	◆	◆	◆	◆	◆
Eucalyptus globulus	◆	◆	◆	◆	◆	◆	◆	◆	◆
Folic acid	◆	◆	◆	◆	◆	◆	◆	◆	◆
Garlic	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ginger (Z. officinale)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ginkgo biloba	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ginseng	◆	◆	◆	◆	◆	◆	◆	◆	◆
Goldenseal (H. canadensis)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Grape seed extract	◆	◆	◆	◆	◆	◆	◆	◆	◆
Grapefruit juice	◆	◆	◆	◆	◆	◆	◆	◆	◆
Green tea (C. sinensis)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Homeopathic remedies	◆	◆	◆	◆	◆	◆	◆	◆	◆
Inula racemosa	◆	◆	◆	◆	◆	◆	◆	◆	◆
Heroin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Iodine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Iron supplements	◆	◆	◆	◆	◆	◆	◆	◆	◆
Kava kava (P. methysticum)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Milk thistle	◆	◆	◆	◆	◆	◆	◆	◆	◆
Retinol (Vitamin A)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Riboflavin (Vitamin B2)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Serenoa repens	◆	◆	◆	◆	◆	◆	◆	◆	◆
St John's wort	◆	◆	◆	◆	◆	◆	◆	◆	◆
Thiamine (Vitamin B1)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Turmeric (curcumin)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Valerian	◆	◆	◆	◆	◆	◆	◆	◆	◆
Vitamin E	◆	◆	◆	◆	◆	◆	◆	◆	◆

**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.

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

*We aim to ensure that information is accurate and consistent with current knowledge and practice. However, the University of Liverpool and its servants or agents shall not be responsible or in any way liable for the continued currency of information in this publication whether arising from negligence or otherwise howsoever or for any consequences arising therefrom. The University of Liverpool expressly exclude liability for errors, omissions or inaccuracies to the fullest extent permitted by law.*

# Interactions with HBV Treatment

Charts revised February 2021. Full information available at [www.hep-druginteractions.org](http://www.hep-druginteractions.org)

Page 5 of 6

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

ADV, Adefovir; ETV, Entecavir; LAM, Lamivudine; PEG IFN, Peginterferon; RBV, Ribavirin; TBV, Telbivudine; TAF, Tenofovir alafenamide; TDF, Tenofovir-DF.

	ADV	ETV	LAM	PEG IFN alfa-2a	PEG IFN alfa-2b	RBV	TBV	TAF	TDF
<b>HIV Drugs</b>									
<b>Entry/Integrase Inhibitors</b>									
Bictegravir/FTC/TAF	●	◆	●	■	■	■	■	●	●
Dolutegravir	◆	◆	◆	◆	◆	◆	◆	◆	◆
Dolutegravir/rilpivirine	◆	◆	■	◆	◆	◆	■	◆	◆
Elvitegravir/cobi /FTC/TAF	●	◆	●	■	■	■	■	●	●
Elvitegravir/cobi/FTC/TDF	●	◆	●	■	■	■	■	●	●
Ibalizumab-uiyk	◆	◆	◆	◆	◆	◆	■	◆	◆
Maraviroc	◆	◆	◆	◆	◆	◆	◆	◆	◆
Raltegravir	◆	◆	◆	◆	◆	◆	■	◆	◆
<b>NNRTIs</b>									
Dolutegravir/rilpivirine	◆	◆	■	◆	◆	◆	■	■	■
Doravirine	◆	◆	◆	◆	◆	◆	■	◆	◆
Doravirine/3TC/TDF	●	◆	●	■	■	■	■	●	●
Efavirenz	◆	◆	◆	◆	◆	◆	◆	◆	◆
Etravirine	◆	◆	◆	◆	◆	◆	■	◆	◆
Nevirapine	◆	◆	◆	◆	◆	◆	■	◆	◆
Rilpivirine	◆	◆	◆	◆	◆	◆	■	◆	◆
Rilpivirine/FTC/TAF	●	◆	●	■	■	■	■	●	●
<b>NRTIs</b>									
Abacavir	◆	◆	◆	■	■	■	■	◆	◆
Didanosine	◆	◆	◆	●	●	●	●	◆	◆
Emtricitabine (FTC)	■	◆	●	■	■	■	■	◆	◆
Emtricitabine + TAF	●	◆	●	■	■	■	■	●	●
Emtricitabine + TDF	●	◆	●	■	■	■	■	●	●
Lamivudine	◆	◆	◆	◆	◆	◆	■	◆	◆
Stavudine	■	◆	◆	■	■	■	■	◆	◆
Tenofovir-DF	●	◆	●	■	■	■	■	●	●
Zidovudine	◆	◆	◆	●	●	●	■	◆	◆
<b>Protease Inhibitors</b>									
Atazanavir alone	◆	◆	◆	◆	◆	■	■	◆	◆
Atazanavir/cobicistat	◆	◆	◆	◆	◆	■	■	◆	◆
Atazanavir + ritonavir	◆	◆	◆	◆	◆	■	■	◆	◆
Darunavir/cobicistat	◆	◆	◆	◆	◆	◆	■	◆	◆
Darunavir/cobi/FTC/TAF	●	◆	●	■	■	■	■	●	●
Darunavir + ritonavir	◆	◆	◆	◆	◆	◆	■	◆	◆
Fosamprenavir	◆	◆	◆	◆	◆	◆	■	◆	◆
Indinavir	◆	◆	◆	◆	◆	◆	■	◆	◆
Lopinavir	◆	◆	◆	◆	◆	◆	■	◆	◆
Ritonavir	◆	◆	◆	◆	◆	◆	■	◆	◆
Saquinavir	◆	◆	◆	◆	◆	◆	■	◆	◆
Tipranavir	◆	◆	◆	◆	◆	◆	■	◆	◆

	ADV	ETV	LAM	PEG IFN alfa-2a	PEG IFN alfa-2b	RBV	TBV	TAF	TDF
<b>Hypertension/Heart Failure Agents</b>									
Acebutolol	◆	◆	◆	◆	◆	◆	◆	◆	◆
Aliskiren	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ambrisentan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Amiloride	◆	◆	◆	◆	◆	◆	◆	◆	◆
Azilsartan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Benazepril	◆	◆	◆	◆	◆	◆	◆	◆	◆
Bendroflumethiazide	◆	◆	◆	◆	◆	◆	◆	◆	■
Bosentan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Bumetanide	■	■	◆	◆	◆	◆	◆	◆	■
Candesartan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Captopril	■	■	◆	◆	◆	◆	◆	◆	◆
Chlorthalidone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Cilazapril	◆	◆	◆	◆	◆	◆	◆	◆	◆
Clevidipine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Clonidine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Doxazosin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Enalapril	◆	◆	◆	◆	◆	◆	◆	◆	◆
Eplerenone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Epoprostenol	◆	◆	◆	◆	◆	◆	◆	◆	◆
Eprosartan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fosinopril	◆	◆	◆	◆	◆	◆	◆	◆	◆
Furosemide	■	■	◆	◆	◆	◆	◆	◆	■
Hydralazine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Hydrochlorothiazide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Iloprost	◆	◆	◆	◆	◆	◆	◆	◆	◆
Indapamide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Irbesartan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Isradipine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ivabradine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lacidipine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lercanidipine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lisinopril	◆	◆	◆	◆	◆	◆	◆	◆	◆
Losartan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Macitentan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Methyldopa	◆	◆	◆	◆	◆	◆	◆	◆	◆
Metolazone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Moxonidine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Olmesartan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Perindopril	◆	◆	◆	◆	◆	◆	◆	◆	◆
Prazosin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Quinapril	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ramipril	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ranolazine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Rilmendidine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Riociguat	◆	◆	◆	◆	◆	◆	◆	◆	◆
Selexipag	◆	◆	◆	◆	◆	◆	◆	◆	◆
Sildenafil	◆	◆	◆	◆	◆	◆	◆	◆	◆
Spirolactone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Tadalafil	◆	◆	◆	◆	◆	◆	◆	◆	◆
Telmisartan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Torsemide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Trandolapril	◆	◆	◆	◆	◆	◆	◆	◆	◆
Treprostinil	◆	◆	◆	◆	◆	◆	◆	◆	◆
Valsartan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Xipamide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Zofenopril	◆	◆	◆	◆	◆	◆	◆	◆	◆

For personal use only. Not for distribution.

**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.

© Liverpool Drug Interactions Group,  
 University of Liverpool, Pharmacology Research Labs,  
 1st Floor Block H, 70 Pembroke Place, LIVERPOOL, L69 3GF  
 We aim to ensure that information is accurate and consistent with current knowledge and practice. However, the University of Liverpool and its servants or agents shall not be responsible or in any way liable for the continued currency of information in this publication whether arising from negligence or otherwise howsoever or for any consequences arising therefrom. The University of Liverpool expressly exclude liability for errors, omissions or inaccuracies to the fullest extent permitted by law.

# Interactions with HBV Treatment

Charts revised February 2021. Full information available at [www.hep-druginteractions.org](http://www.hep-druginteractions.org)

Page 6 of 6

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

ADV, Adefovir; ETV, Entecavir; LAM, Lamivudine; PEG IFN, Peginterferon; RBV, Ribavirin; TBV, Telbivudine; TAF, Tenofovir alafenamide; TDF, Tenofovir-DF.

	ADV	ETV	LAM	PEG IFN alfa-2a	PEG IFN alfa-2b	RBV	TBV	TAF	TDF
<b>Illicit/Recreational</b>									
Alcohol	◆	◆	◆	◆	◆	◆	◆	◆	◆
Amphetamine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Cannabis	◆	◆	◆	◆	◆	◆	◆	◆	◆
Carfentanil	◆	◆	◆	◆	◆	◆	◆	◆	◆
Cocaine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ecstasy (MDMA)	◆	◆	◆	◆	◆	◆	◆	◆	◆
GHB (Gamma-hydroxybutyrate)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Heroin	◆	◆	◆	◆	◆	◆	◆	◆	◆
LSD (Lysergic acid diethylamide)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Mephedrone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Methamphetamine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Phencyclidine (PCP)	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>Immunosuppressants</b>									
Adalimumab	◆	◆	◆	▲	▲	■	◆	◆	◆
Alemtuzumab	◆	◆	◆	◆	◆	◆	◆	◆	◆
Anakinra	◆	◆	◆	■	■	■	◆	◆	◆
Azathioprine	◆	◆	◆	■	■	■	◆	◆	◆
Baricitinib	◆	◆	◆	■	■	■	◆	◆	◆
Basiliximab	◆	◆	◆	◆	◆	◆	◆	◆	◆
Brodalumab	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ciclosporin	◆	◆	◆	◆	◆	◆	■	■	■
Eculizumab	◆	◆	◆	◆	◆	◆	◆	◆	◆
Etanercept	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fingolimod	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lenalidomide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Mycophenolate	◆	◆	◆	■	■	■	◆	◆	■
Pirfenidone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Sirolimus	◆	◆	◆	◆	◆	◆	◆	◆	▲
Tacrolimus	◆	◆	◆	◆	◆	◆	◆	◆	▲
Upadacitinib	◆	◆	◆	■	■	■	◆	◆	◆
<b>Lipid Lowering Agents</b>									
Atorvastatin	◆	◆	◆	◆	◆	◆	■	◆	◆
Bezafibrate	◆	◆	◆	◆	◆	◆	■	◆	■
Ezetimibe	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fenofibrate	◆	◆	◆	◆	◆	◆	■	◆	◆
Fish oils	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fluvastatin	◆	◆	◆	◆	◆	◆	■	◆	◆
Gemfibrozil	◆	◆	◆	◆	◆	◆	■	◆	◆
Lovastatin	◆	◆	◆	◆	◆	◆	■	◆	◆
Pitavastatin	◆	◆	◆	◆	◆	◆	■	◆	◆
Pravastatin	◆	◆	◆	◆	◆	◆	■	◆	◆
Rosuvastatin	◆	◆	◆	◆	◆	◆	■	◆	◆
Simvastatin	◆	◆	◆	◆	◆	◆	■	◆	◆

	ADV	ETV	LAM	PEG IFN alfa-2a	PEG IFN alfa-2b	RBV	TBV	TAF	TDF
<b>Other Drugs</b>									
Acamprosate	◆	◆	◆	◆	◆	◆	◆	◆	◆
Acetazolamide	■	■	◆	◆	◆	◆	◆	◆	■
Acitretin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Activated charcoal	▲	▲	▲	◆	◆	▲	▲	▲	▲
Allopurinol	◆	◆	◆	■	■	■	◆	◆	◆
Atomoxetine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Atropine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Baclofen	◆	◆	◆	◆	◆	◆	◆	◆	◆
Bamlanivimab	◆	◆	◆	◆	◆	◆	◆	◆	◆
Benralizumab	◆	◆	◆	◆	◆	◆	◆	◆	◆
Bethahistine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Bimatoprost	◆	◆	◆	◆	◆	◆	◆	◆	◆
Biperiden	◆	◆	◆	◆	◆	◆	◆	◆	◆
Brinzolamide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Bromocriptine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Calcitonin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Calcium carbimide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Calcium resonium	◆	◆	◆	◆	◆	◆	◆	◆	◆
Cannabidiol	◆	◆	◆	◆	◆	◆	◆	◆	◆
Carbimazole	◆	◆	◆	◆	◆	◆	◆	◆	◆
Carisoprodol	◆	◆	◆	◆	◆	◆	◆	◆	◆
Casirivimab/imdevimab	◆	◆	◆	◆	◆	◆	◆	◆	◆
Clozapine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Clomifene	◆	◆	◆	◆	◆	◆	◆	◆	◆
Colchicine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Colestyramine	▲	▲	▲	◆	◆	▲	▲	▲	▲
Conivaptan	◆	◆	◆	◆	◆	◆	◆	◆	◆
COVID-19 vaccinations	◆	◆	◆	◆	◆	◆	◆	◆	◆
Cyclobenzaprine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Cytisine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Darbepoetin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Deferiprone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Denosumab	◆	◆	◆	◆	◆	◆	◆	◆	◆
Dexamfetamine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Dextromethorphan	◆	◆	◆	◆	◆	◆	◆	◆	◆
Disulfiram	◆	◆	◆	■	■	◆	◆	◆	◆
Donepezil	◆	◆	◆	◆	◆	◆	◆	◆	◆
Dorzolamide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Dupilumab	◆	◆	◆	◆	◆	◆	◆	◆	◆
Eliglustat	◆	◆	◆	■	◆	◆	◆	◆	◆
Epoetin alfa	◆	◆	◆	◆	◆	◆	◆	◆	◆
Etelcalcetide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Febuxostat	◆	◆	◆	◆	◆	◆	◆	◆	◆
Filgrastim	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fibanserin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Gadopentetate (gadolinium)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Glycerol phenylbutyrate	◆	◆	◆	◆	◆	◆	◆	◆	◆
Goserelin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Influenza vaccine	◆	◆	◆	◆	◆	◆	◆	◆	◆

For personal use only. Not for distribution.

**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.

© Liverpool Drug Interactions Group,  
 University of Liverpool, Pharmacology Research Labs,  
 1st Floor Block H, 70 Pembroke Place, LIVERPOOL, L69 3GF  
 We aim to ensure that information is accurate and consistent with current knowledge and practice. However, the University of Liverpool and its servants or agents shall not be responsible or in any way liable for the continued currency of information in this publication whether arising from negligence or otherwise howsoever or for any consequences arising therefrom. The University of Liverpool expressly exclude liability for errors, omissions or inaccuracies to the fullest extent permitted by law.

# Interactions with HBV Treatment

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

ADV, Adefovir; ETV, Entecavir; LAM, Lamivudine; PEG IFN, Peginterferon; RBV, Ribavirin; TBV, Telbivudine; TAF, Tenofovir alafenamide; TDF, Tenofovir-DF.

	ADV	ETV	LAM	PEG IFN alfa-2a	PEG IFN alfa-2b	RBV	TBV	TAF	TDF
<b>Other Drugs Continued</b>									
Isosorbide mononitrate	◆	◆	◆	◆	◆	◆	◆	◆	◆
Isotretinoin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lanreotide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Levothyroxine	◆	◆	◆	◆	◆	■	◆	◆	◆
Lofexidine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Lumacaftor/Ivacaftor	◆	◆	◆	◆	◆	◆	◆	◆	◆
Magnesium	◆	◆	◆	◆	◆	◆	◆	◆	◆
Melatonin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Memantine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Methylphenidate	◆	◆	◆	◆	◆	◆	◆	◆	◆
Minoxidil	◆	◆	◆	◆	◆	◆	◆	◆	◆
Modafinil	◆	◆	◆	◆	◆	◆	◆	◆	◆
Naftidrofuryl	◆	◆	◆	◆	◆	◆	◆	◆	◆
Nalmefene	◆	◆	◆	◆	◆	◆	◆	◆	◆
Naloxone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Naltrexone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Neostigmine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Nicorandil	◆	◆	◆	◆	◆	◆	◆	◆	◆
Nusinersen	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ocrelizumab	◆	◆	◆	◆	◆	◆	◆	◆	◆
Orlistat	▲	▲	▲	◆	◆	▲	▲	▲	▲
Penicillamine	◆	◆	◆	◆	◆	◆	■	◆	◆
Pentoxifylline	◆	◆	◆	◆	◆	◆	◆	◆	◆
Phenylephrine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Pilocarpine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Piracetam	◆	◆	◆	◆	◆	◆	◆	◆	◆
Potassium	◆	◆	◆	◆	◆	◆	◆	◆	◆
Protamine sulphate	◆	◆	◆	◆	◆	◆	◆	◆	◆
Pseudoephedrine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Pyridostigmine	▲	▲	▲	◆	◆	◆	◆	◆	▲
Raloxifene	◆	◆	◆	◆	◆	◆	◆	◆	◆
Sevelamer	▲	▲	▲	◆	◆	▲	▲	▲	▲
Strontium ranelate	◆	◆	◆	◆	◆	◆	◆	◆	◆
Thalidomide	◆	◆	◆	■	■	■	◆	◆	◆
Tranexamic acid	◆	◆	◆	◆	◆	◆	◆	◆	◆
Varenicline	◆	◆	◆	◆	◆	◆	◆	◆	◆

	ADV	ETV	LAM	PEG IFN alfa-2a	PEG IFN alfa-2b	RBV	TBV	TAF	TDF
<b>Oxytocics</b>									
Ergometrine (ergonovine)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Mifepristone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Misoprostol	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>Parkinsonism Agents</b>									
Benzotropine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Carbidopa	◆	◆	◆	◆	◆	◆	◆	◆	◆
Orphenadrine	◆	◆	◆	◆	◆	◆	◆	◆	◆
Pramipexole	◆	◆	▲	◆	◆	◆	◆	◆	◆
Procyclidine	◆	◆	▲	◆	◆	◆	◆	◆	◆
Rasagiline	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ropinireole	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>PBC Agents</b>									
Obeticholic acid	▲	◆	◆	◆	◆	◆	◆	◆	◆
Ursodeoxycholic acid	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>Steroids</b>									
Beclomethasone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Betamethasone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Budesonide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Ciclesonide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Clobetasol (topical)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Clobetasone (topical)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Dexamethasone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fludrocortisone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Flunisolide	◆	◆	◆	◆	◆	◆	◆	◆	◆
Fluticasone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Hydrocortisone (topical)	◆	◆	◆	◆	◆	◆	◆	◆	◆
Methylprednisolone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Mometasone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Prednicarbate	◆	◆	◆	◆	◆	◆	◆	◆	◆
Prednisone	◆	◆	◆	◆	◆	◆	◆	◆	◆
Triamcinolone	◆	◆	◆	◆	◆	◆	◆	◆	◆
<b>Urological Agents</b>									
Alfuzosin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Desmopressin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Dutasteride	◆	◆	◆	◆	◆	◆	◆	◆	◆
Finasteride	◆	◆	◆	◆	◆	◆	◆	◆	◆
Mirabegron	◆	◆	◆	◆	◆	◆	◆	◆	◆
Silodosin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Solifenacin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Tamsulosin	◆	◆	◆	◆	◆	◆	◆	◆	◆
Tolterodine	◆	◆	◆	◆	◆	◆	◆	◆	◆

For personal use only. Not for distribution.

**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.

© Liverpool Drug Interactions Group,  
 University of Liverpool, Pharmacology Research Labs,  
 1st Floor Block H, 70 Pembroke Place, LIVERPOOL, L69 3GF  
 We aim to ensure that information is accurate and consistent with current knowledge and practice. However, the University of Liverpool and its servants or agents shall not be responsible or in any way liable for the continued currency of information in this publication whether arising from negligence or otherwise howsoever or for any consequences arising therefrom. The University of Liverpool expressly exclude liability for errors, omissions or inaccuracies to the fullest extent permitted by law.