

Antipsychotics/Neuroleptics Treatment Selector

Charts revised July 2022.

Full information available at www.hep-druginteractions.org

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	DCV	ELB/GZR	G/P	LED/SOF	OBV/PTV/r	OBV/PTV/r +DSV	SMV	SOF	SOF/VEL	SOF/VEL/VOX
Amisulpride	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
Aripiprazole	↔	↑	↑	↔	↑	↑	↑	↔	↔	↔
Asenapine	↔	↔	↔	↔	↓	↓	↔	↔	↔	↔
Chlorpromazine	↔	↔	↔	↔	↑	↑	↔	↔	↔	↔
Chlorprothixene	↔	↔	↔	↔	↑ ^a	↑ ^a	↔	↔	↔	↔
Clozapine	↔	↔	↑ ^b	↔	↑	↑	↑	↔	↔	↔
Flupentixol	↔	↔	↔	↔	↑ ^c	↑ ^c	↔	↔	↔	↔
Fluphenazine	↔	↔	↔	↔	↑	↑	↔	↔	↔	↔
Haloperidol	↔	↔	↔	↔	↑	↑	↔	↔	↔	↔
Iloperidone	↔	↔	↔	↔	↑ ^d	↑ ^d	↔	↔	↔	↔
Levomepromazine	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
Lurasidone	↔	↑	↑	↔	↑	↑	↑	↔	↔	↔
Olanzapine	↔	↔	↔	↔	↑	↑	↔	↔	↔	↔
Paliperidone	↑	↔	↑	↑	↑	↑	↑	↔	↑	↑
Perazine	↔	↔	↔	↔	↑ ^e	↑ ^e	↑ ^e ↑	↔	↔	↔
Pericyazine	↔	↔	↔	↔	↑ ^f	↑ ^f	↔	↔	↔	↔
Perphenazine	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
Pimozide	↔	↑	↑	↑	↑	↑	↑	↔	↔	↔
Pipotiazine	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
Prochlorperazine	↔	↔	↔	↔	↑	↑	↔	↔	↔	↔
Quetiapine	↔	↑ ^g	↑ ^g	↔	↑	↑	↑ ^g	↔	↔	↔
Risperidone	↑	↔	↑	↑	↑	↑	↑	↔	↑	↑
Sulpiride	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
Tiapride	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
Trifluoperazine	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
Ziprasidone	↔	↔	↔	↔	↑	↑	↔	↔	↔	↔
Zuclophenthixol	↔	↔	↔	↔	↑	↑	↔	↔	↔	↔

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 antipsychotic/neuroleptic ↑↑ Potential increased exposure of HCV DAA
- ↓ Potential decreased exposure of the antipsychotic/neuroleptic ↓↓ Potential decreased exposure of HCV DAA
- ↔ No significant effect

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

- a Caution is advised, as only a modest increase in chlorprothixene may prolong QT.
- b Interaction is not deemed significant in labels, but monitoring is advised as clozapine is associated with significant toxicities.
- c A dose decrease of flupentixol should be considered.
- d A dose reduction of ~50% of Iloperidone is advised.
- e ECG monitoring is recommended; cardiac conduction abnormalities have been noted with perazine.
- f Clinical monitoring is advised, as pericyazine can prolong QT.
- g Quetiapine has a narrow therapeutic index; monitor for toxicity and consider TDM and ECG monitoring.

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