

# Beta Blockers Treatment Selector

Charts revised October 2022. Full information available at [www.hiv-druginteractions.org](http://www.hiv-druginteractions.org)

For personal use only. Not for distribution. For personal use only. Not for distribution. For personal use only. Not for distribution. For personal use only. Not for distribution.

	ATV/c	ATV/r	DRV/c	DRV/r	LPV/r	DOR	EFV	ETV	NVP	RPV oral	FTR	LEN	MVC	BIC/F/TAF	CAB oral	CAB/RPV	DTG	EVG/c/F/TAF	EVG/c/F/TDF	RAL	FTC/TAF	FTC/TDF
<b>β Blockers</b>																						
Atenolol	↑♥	↔♥	↑	↔	↔♥	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
Bisoprolol	↑♥	↑♥	↑	↑	↑♥	↔	↓	↓	↔	↔	↔	↑	↔	↔	↔	↔	↔	↔	↑	↑	↔	↔
Carvedilol	↑♥	↑↓♥	↑	↑↓	↑↓♥	↔	↑↓	↑↓	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↑	↑	↔	↔
Labetalol	↑♥	↓♥	↔	↓	↓♥	↔	↓	↓	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
Metoprolol	↑♥	↑♥	↑	↑	↑♥	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↑	↑	↔	↔
Nebivolol	↑♥	↑♥	↑	↑	↑♥	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↑	↑	↔	↔
Oxprenolol	↑♥	↑♥	↔	↓	↓♥	↔	↓	↓	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
Pindolol	↑♥	↑♥	↑	↑	↑♥	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↑	↑	↔	↔
Propranolol	↑♥	↑♥	↑	↑	↑♥	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↑	↑	↔	↔
Sotalol	↑♥	↑♥	↑	↔	↔♥	↔	↔	↔	↔	↔♥	↔♥	↔	↔	↔	↔	↔	↔	↔	↑	↑	↔	↔
Timolol	↑♥	↑♥	↑	↑	↑♥	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↑	↑	↔	↔

**Interactions with CAB/RPV long acting injections**

Pharmacokinetic interactions shown are mostly with RPV. QT interactions shown are with RPV.

**Interactions with Lenacapavir**

Residual LEN may affect exposure of sensitive CYP3A4 substrates initiated within 9 months after stopping subcutaneous LEN.

**Interactions with Ibalizumab**

None

**Interactions with Abacavir (ABC), Lamivudine (3TC), Tenofovir-DF (TDF) or Zidovudine (ZDV)**

ABC: No clinically relevant interactions expected.

3TC: Increased atenolol and 3TC exposure when coadministered.

TDF: No clinically relevant interactions expected.

ZDV: No clinically relevant interactions expected.

**Colour Legend**

- No clinically significant interaction expected.
- These drugs should not be coadministered.
- Potential interaction which may require a dose 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 antihypertensive
  - ↓ Potential decreased exposure of the antihypertensive
  - ↔ No significant effect
  - ♥ One or both drugs may cause QT and/or PR prolongation. ECG monitoring is advised if coadministered with atazanavir or lopinavir.
  - ↑ Potential increased exposure of HIV drug
- Rilpivirine and fostemsavir were shown to prolong the QT interval at supratherapeutic doses. Caution is advised with rilpivirine. ECG monitoring is advised with fostemsavir and drugs with a known QT prolongation risk.