

Beta Blockers Treatment Selector

Charts revised December 2023. Full information available at www.hiv-druginteractions.org

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	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
β Blockers																						
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. Efavirenz has a potential risk of QT prolongation relating specifically to homozygous carriers of CYP2B6*6/*6. 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.
- ↑ Potential increased exposure of HIV drug