

# Anti-diabetic Treatment Selector

Charts revised November 2017. Full information available at [www.hiv-druginteractions.org](http://www.hiv-druginteractions.org)

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		ATV/r	DRV/r	LPV/r	EFV	ETV	NVP	RPV	MVC	DTG	RAL	ABC	FTC	3TC	TDF	ZDV	E/C/F/TAF	E/C/F/TDF
SU	Glibenclamide	↑	↑	↑	↓	↓	↓	↔	↔	↔	↔	↔	↔	↔	↔	↔	↑	↑
	Gliclazide	↓	↓	↓	↑	↑	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↓	↓
	Glipizide	↓	↓	↓	↑	↑	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↓	↓
	Tolbutamide	↓	↓	↓	↑	↑	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↓	↓
BIG	Metformin	↔	↔	↔	↔	↔	↔	↔	↔	↑ <sup>a</sup>	↔	↔	↔	↔	↔	↔	↔	↑ <sup>a</sup>
TZD	Pioglitazone	↑	↑	↑	↑	↓	↓	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↑
	Rosiglitazone	↔	↓	↓	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
MEG	Nateglinide	↑↓	↑↓	↑↓	↑↓	↑↓	↓	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↑↓
	Repaglinide	↑	↑	↑	↑↓	↓	↓	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↑
GLP-1	Exenatide	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
	Liraglutide	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔
DPP-4	Linagliptin	↑ <sup>b</sup>	↑ <sup>b</sup>	↑ <sup>b</sup>	↓	↓	↓	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↑ <sup>b</sup>
	Saxagliptin	↑	↑	↑	↓	↓	↓	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↑
	Sitagliptin	↑ <sup>b</sup>	↑ <sup>b</sup>	↑ <sup>b</sup>	↓	↓	↓	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↑ <sup>b</sup>
	Vildagliptin	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔	↔

### 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. No *a priori* dosage adjustment is recommended.

### Text Legend

- ↑ Potential increased exposure of the anti-diabetic drug
- ↓ Potential decreased exposure of the anti-diabetic drug
- ↔ No significant effect

- SU Sulfonylureas
- BIG Biguanides
- TZD Thiazolidinediones
- MEG Meglitinides
- GLP-1 GLP-1 agonist
- DPP-4 DPP-4 inhibitors

- a Close monitoring is recommended when starting or stopping the combination of these antiretrovirals and metformin as a dose adjustment of metformin may be necessary.
- b Increase in anti-diabetic drug exposure is not considered as clinically significant as the drug is mainly eliminated unchanged and has a large safety window.