

# Simeprevir (Olysio TM) and Sofosbuvir (Sovaldi TM) Drug Interactions A Quick Guide for Clinicians – April 2017

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Mechanism of Action and Route of Metabolism for Simeprevir (Olysio<sup>™</sup>) and Sofosbuvir (Sovaldi<sup>™</sup>)

Medication	<b>HCV Mechanism of Action</b>	Route of Metabolism and Drug Interaction Potential
Simeprevir (Olysio <sup>TM</sup> )	NS3/4a protease inhibitor	<ul> <li>Simeprevir is a mild inhibitor of CYP1A2 activity and intestinal CYP3A4, but does not affect hepatic CYP3A4 activity. Simeprevir also inhibits OATP1B1/3 and P-glycoprotein (P-gp) transporters.</li> </ul>
Sofosbuvir (Sovaldi <sup>TM</sup> )	NS5b polymerase inhibitor	<ul> <li>Sofosbuvir is a substrate for P-glycoprotein (P-gp) and breast cancer resistance protein (BCRP). The intracellular metabolism of sofosbuvir is mediated by hydrolase and nucleotide phosphorylation pathways.</li> </ul>

#### Simeprevir (Olysio <sup>™</sup>) Drug Interactions with HIV Medications

Concurrent Medication	Recommendation and Clinical Comment
HIV Protease Inhibitors	
Atazanavir (Reyataz®)	Significant increase or decrease in simeprevir levels expected when used with any HIV
Darunavir (Prezista®)	protease inhibitor, when used with or without ritonavir. Co-administration not
Fosamprenavir (Lexiva®)	recommended.
Indinavir (Crixivan®)	
Lopinavir/ritonavir (Kaletra®)	
Ritonavir (Norvir®) at any dosage	
Saquinavir (Invirase®)	
Tipranavir (Aptivus®)	
<b>HIV Non Nucleoside Reverse Transcriptase Inhibi</b>	tors
Efavirenz (Sustiva®)	Significant decrease in simeprevir levels expected when used with efavirenz,
Etravirine (Intelence®)	etravirine, and nevirapine. Co-administration not recommended.
Nevirapine (Viramune®)	
Rilpivirine (Edurant®, also contained in	Concurrent use at standard doses appropriate.
Complera® and Odefsey®)	

HIV Entry Inhibitors		
Maraviroc (Selzentry®)	Concurrent use at standard doses appropriate.	
HIV Integrase Strand Transfer Inhibitors		
Dolutegravir (Tivicay®)	Concurrent use at standard doses appropriate.	
Elvitegravir/cobicistat/tenofovir disoproxil	Significant increase in simeprevir levels expected when used with a cobicistat	
fumarate/emtricitabine (Stribild®) and	containing regimen. Co-administration not recommended.	
Elvitegravir/cobicistat/tenofovir		
alafenamide/emtricitabine (Genvoya®)		
Raltegravir (Isentress®)	Concurrent use at standard doses appropriate.	
HIV Nucleoside/Nucelotide Reverse Transcriptase	Inhibitors	
Abacavir (Ziagen®)	Concurrent use at standard doses appropriate.	
Emtricitabine (Emtriva®)		
Lamivudine (Epivir®)		
Stavudine (Zerit®)		
Tenofovir disoproxil fumarate (Viread®)		
Tenofovir alafenamide (Descovy®)		
Didanosine (Videx EC®)	When using ribavirin with simeprevir/sofosbuvir, the use of didanosine or zidovudine	
Zidovudine (Retrovir®)	should be avoided due to overlapping toxicity.	

## Primary Care Medications to Avoid with Simeprevir (Olysio<sup>™</sup> )

Medication and or Class	Recommendation and Clinical Comment
Anticonvulsants - carbamazepine,	Significant decrease in simeprevir levels expected leading to reduced simeprevir
oxcarbazepine, phenobarbital, phenytoin	efficacy. Co-administration not recommended.
Antibiotics – clarithromycin, erythromycin,	Significant increase in simeprevir or antibiotic levels due to CYP3A4 and P-glycoprotein
telithromycin	(P-gp) inhibition. Co-administration not recommended.
Antifungals – fluconazole, itraconazole,	Significant increase in simeprevir levels expected due to CYP3A4 inhibition from the
ketoconazole, posaconazole, voriconazole	antifungals. Co-administration not recommended.
Antimycobacterials – rifampin, rifabutin,	Significant decrease in simeprevir levels expected leading to reduced simeprevir
rifapentine	efficacy. Co-administration not recommended.
Corticosteroids – dexamethasone	Significant decrease in simeprevir levels expected leading to reduced simeprevir
	efficacy. Co-administration not recommended.
Propulsive – cisapride	Significant increase in cisapride levels expected leading to potential cardiac
	arrhythmias. Co-administration not recommended.
Herbal products – Milk Thistle, St. John's Wort	Significant increase in simeprevir levels expected when used with milk thistle. Co-
	administration not recommended.
	Significant decrease in simeprevir levels expected when used with St. Johns Wort due
	to intestinal P-glycoprotein (P-gp) induction. Co-administration not recommended.

#### Primary Care Medications to be Used with Caution with Simeprevir (Olysio<sup>™</sup> )

Concurrent Medication	Recommendation and Clinical Comment
Digoxin	Increased digoxin levels expected, monitor levels
Antiarrhythmics	Potential increase in levels, monitor levels if possible
Calcium channel blockers	Potential increase in levels, monitor for hypotension
Atorvastatin	Increased atorvastatin levels, use lowest does, do not exceed 40mg daily
Rosuvastatin	Increased rosuvastatin levels, initiate with 5mg daily, do not exceed 10 mg daily
Simvastatin, pitavastatin, pravastatin,	Use lowest dose possible, titrate carefully
lovastatin	
Oral midazolam, triazolam	Increased levels expected, titrate carefully, use lowest doses

### Sofosbuvir (Sovaldi<sup>™</sup>) Drug Interactions with HIV Medications

Concurrent Medication	Recommendation and Clinical Comment	
HIV Protease Inhibitors		
Atazanavir (Reyataz®)	Concurrent use at standard doses appropriate.	
Darunavir (Prezista®)		
Fosamprenavir (Lexiva®)		
Indinavir (Crixivan®)		
Lopinavir/ritonavir (Kaletra®)		
Ritonavir (Norvir®) at any dosage		
Saquinavir (Invirase®)		
Tipranavir (Aptivus®) + ritonavir (Norvir®)	Significant decrease in sofosbuvir levels expected leading to decreased sofosbuvir	
	efficacy. Co-administration not recommended.	
HIV Non Nucleoside Reverse Transcriptase Inhibitors		
Efavirenz (Sustiva®)	Concurrent use at standard doses appropriate.	
Etravirine (Intelence®)	Concurrent use at standard doses appropriate.	
Nevirapine (Viramune®)		
Rilpivirine (Edurant®, also contained in	Concurrent use at standard doses appropriate.	
Complera® and Odefsey®)		

LIIV Integrace Strand Transfer Inhibitors	
HIV Integrase Strand Transfer Inhibitors	
Dolutegravir (Tivicay®, also contained in	Concurrent use at standard doses appropriate.
Triumeq®)	
Elvitegravir/cobicistat/tenofovir disoproxil	Concurrent use at standard doses appropriate.
fumarate/emtricitabine (Stribild®) and	
Elvitegravir/cobicistat/tenofovir	
alafenamide/emtricitabine (Genvoya®)	
Raltegravir (Isentress®)	Concurrent use at standard doses appropriate.
HIV Entry Inhibitors	
Maraviroc (Selzentry®)	Concurrent use at standard doses appropriate.
HIV Nucleoside/Nucleotide Reverse Transcriptase	e Inhibitors
Abacavir (Ziagen®)	Concurrent use at standard doses appropriate.
Emtricitabine (Emtriva®)	
Lamivudine (Epivir®)	
Stavudine (Zerit®)	
Tenofovir disoproxil fumarate (Viread®)	
Tenofovir alafenamide (Descovy®)	
Didanosine (Videx EC®)	<ul> <li>When using ribavirin with simeprevir/sofosbuvir, the use of didanosine or zidovudine</li> </ul>
Zidovudine (Retrovir®)	should be avoided due to overlapping toxicity.
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#### Non HIV Medications to Avoid with Sofosbuvir (Sovaldi<sup>™</sup>)Therapy

Medication and or Class	Rationale for Avoiding with Sofosbuvir
Antiarrhythmic – Amiodarone	Serious symptomatic bradycardia may occur, concurrent use not recommended. See
	product information for additional details.
Anticonvulsants – carbamazepine,	Significant decrease in sofosbuvir levels expected leading to reduced sofosbuvir
oxcarbazepine, phenobarbital, phenytoin	efficacy. Co-administration not recommended.
Antimycobacterials – rifampin, rifabutin,	Significant decrease in sofosbuvir levels expected leading to reduced sofosbuvir
rifapentin	efficacy due to intestinal P-glycoprotein induction from rifampin. Co-administration
	not recommended.
Herbal products – St. John's Wort	Significant decrease in sofosbuvir levels expected leading to reduced sofosbuvir
	efficacy due to intestinal P-glycoprotein induction associated with St. John's Wort.
	Co-administration not recommended.

Disclaimer: The information contained in this table has been developed from various resources, including FDA product information, abstracts and posters presented at national international meetings, and from Recommendations for the Testing, Managing and Treating of Hepatitis C from AASLD and IDSA located at www.hivguidelines.org. While the tal contained in this guide are complete based upon references reviewed, there may be other medications that may also be contraindicated or should be co-administered with caut Please consult additional resources as needed.