clinical cases DDIs

Date of report 28 Jul 2020

Reported case interaction between **Rilpivirine** and **Chlorpromazine**

Drugs suspected to be involved in the DDI

Rilpivirine

Daily Dose
25 (mg)

Dose adjustment performed
No

Administration Route
Oral

Start date
Jan. 23, 2018

End date
Ongoing

Chlorpromazine

Daily Dose
150 (mg)

Dose adjustment performed
No

Administration Route
Oral

Start date
Jan. 1, 2017

End date
Ongoing

Complete list of drugs taken by the patient

Antiretroviral treatment

Rilpivirine/Emtricitabine/Tenofovir-AF

Complete list of all comedications taken by the patient, included that involved in the DDI

Chlorpromazine 150 mg, Trazodone 225 mg, Bisoprolol 3.75 mg, Spironolocatone 100 mg, Pantoprazole 20 mg, Calcium carbonate 1000 mg, Furosemide 25 mg, Beclometasone/ Formeterol, Atorvastatin 20 mg, Colecalciferol

Clinical case description

Gender

Male

Age

50

eGFR (mL/min)

>60

Liver function impairment

Yes

Child-Pugh

Child-Pugh A

Description

HIV/HBV/HCV coinfected patient on long-term HAART with good immunovirological status (CD4 562, HIV RNA not detectable, HBV DNA not detectable), and on SVR after treatment for HCV with DAAs. He is suffering from compensated liver cirrhosis (Child A), recurrent pancreatitis, hypertension, coronary artery disease (acute MI with coronary stent), asthma, and personality disorder/depression. Despite possible QT prolongation by chlorpromazine/trazodone and rilpivirine, cQT was <450 ms in the follow up. In addition, the patient showed sustained virological suppression despite

continued use of pantoprazole/rilpivirine (RPV Ctrough 55 ng/mL; reference 67±30 ng/ml).

Clinical Outcome

No unwanted outcome

Editorial Comment

University of Liverpool Recommendation

■ Potential interaction - may require close monitoring, alteration of drug dosage or timing of administration

For more information click here