



Date of report 11 Dec 2023

## Reported case interaction between **Cobicistat** and **Silodosin**

### Drugs suspected to be involved in the DDI

Perpetrator

**Cobicistat**

Daily Dose

150 (mg)

Dose adjustment performed

No

Administration Route

Oral

Start date

April 22, 2022

End date

Ongoing

Victim

**Silodosin**

Daily Dose

8 (mg)

Dose adjustment performed

No

Administration Route

Oral

Start date

Unknown

End date

Ongoing

## Complete list of drugs taken by the patient

Antiretroviral treatment

Darunavir/Cobicistat/Emtricitabine/Tenofovir-AF

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

Silodosin 8mg/d atorvastatine 40mg/d paracetamol on demand

## Clinical case description

Gender

Male

Age

44

eGFR (mL/min)

>60

Liver function impairment

No

Description

HIV infection diagnosed in 2010, treated by several ART regimens due to different intolerances. DRV/c-FTC-TAF started in 2022 (following intolerance to DTG-3TC) with good tolerance. Some months later, his primary care physician started silodosin 8mg QD due to irritative symptoms of the vessel. Despite the dose exceeding the recommended when it is co-administered with cobicistat, no toxicity was reported. Dose was, anyway, adapted to 4 mg QD in the following HIV visit.

## Clinical Outcome

## No unwanted outcome

### Editorial Comment

Silodosin is a substrate of CYP3A4 and P-gp, and coadministration with cobicistat is expected to increase silodosin concentrations. Coadministration with ketoconazole (440 mg) increased silodosin C<sub>max</sub> and AUC by 3.8-fold and 3.2-fold, respectively. Concomitant use of silodosin with potent CYP3A4 inhibitors is contraindicated (US product label) or not recommended (EU prescribing information). However, given its uroselective effect and wide therapeutic index, silodosin may be used at 4 mg QD (as in this case) with caution and monitoring for side effects such as dizziness, of orthostatic hypotension.

### University of Liverpool Recommendation

- These drugs should not be coadministered

For more information [click here](#)

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