Date of report 17 Jul 2024

Reported case interaction between **Rilpivirine LA** and **Escitalopram**

Drugs suspected to be involved in the DDI

Rilpivirine LA

Daily Dose
900 (mg)

Dose adjustment performed
No

Administration Route
Intramuscular

Start date
Feb. 29, 2024

End date
Ongoing

Escitalopram

Daily Dose
15 (mg)

Dose adjustment performed
No

Administration Route
Oral

Start date
April 1, 2022

End date
Ongoing

Complete list of drugs taken by the patient

Antiretroviral treatment

Cabotegravir/Rilpivirine LA

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

Escitalopram 15 mg/d
Clonazepam 1mg/d

Clinical case description

Gender

Male

Age

38

eGFR (mL/min)

>60

Liver function impairment

No

Description

A male person with HIV requested a switch from oral antiretroviral therapy (ART) with DRV/c + 3TC to intramuscular long-acting ART with CAB-RPV. He requested an immediate switch without an oral lead-in. He was already being treated with escitalopram prescribed by a private psychiatrist. Although the potential for QT prolongation due to citalopram and rilpivirine co-administration was considered, starting RPV after discontinuing DRV/c was expected to have a neutral effect on the QT interval (DRV/c is expected to increase exposure to citalopram). An ECG was performed before the first injection, showing a QT interval within the normal range. Subsequent ECGs at weeks 4 and 8 showed no changes in the QT interval.

Clinical Outcome

No unwanted outcome

Editorial Comment

Rilpivirine has been associated with the prolongation of the QTc interval at supra-therapeutic doses, but this is unlikely to occur when co-administered with escitalopram, given that escitalopram does not inhibit rilpivirine metabolism. The label nevertheless recommends caution when co-administering with drugs associated with a known QT prolongation risk, such as escitalopram. This real-life case provides reassuring data.

University of Liverpool Recommendation

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

For more information click here