

Glecaprevir/Pibrentasvir (Mavyret™) Drug Interactions A Quick Guide for Clinicians – 2023

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Mechanism of Action and Route of Metabolism for Glecaprevir/Pibrentasvir (Mavyret™)

Medication	HCV Mechanism of Action	Route of Metabolism and Drug Interaction Potential
• Glecaprevir/Pibrentasvir (Mavyret™)	NS3/4A protease inhibitor and an NS5a inhibitor	• Glecaprevir and pibrentasvir are inhibitors of P-glycoprotein (P-gp), breast cancer resistance protein (BCRP), and organic anion transporting polypeptide (OATP) 1B1/3. Glecaprevir and pibrentasvir are also weak inhibitors of CYP3A4, CYP1A2 and uridine glucuronosyltransferase (UGT) 1A1.

Glecaprevir/Pibrentasvir (Mavyret[™]) Drug Interactions with HIV Medications

Concurrent Medication	Recommendation and Clinical Comments
HIV Protease Inhibitors	
 Atazanavir (Reyataz[®]) + ritonavir (Norvir[®]) 	Co-administration with atazanavir contraindicated due to increased ALT
• Atazanavir/cobicistat (Evotaz®)	levels. Use of glecaprevir/pibrentasvir with darunavir/ritonavir and
 Darunavir (Prezista[®]) + ritonavir (Norvir[®]) 	lopinavir/ritonavir is not recommended due to expected increases in
 Darunavir/cobicistat (Prezcobix[®]; in Symtuza[®]) 	glecaprevir levels.
• Lopinavir/ritonavir (Kaletra®)	
HIV Non Nucleoside Reverse Transcriptase Inhibitors	
 Efavirenz (Sustiva[®], in Atripla[®], Symfi[®], Symfi Lo[®]) 	Co-administration with efavirenz, etravirine, and nevirapine not
• Etravirine (Intelence [®])	recommended. Significant reduction in glecaprevir/pibrentasvir levels
• Nevirapine (Viramune [®])	expected.
• Rilpivirine oral (Edurant [®] ; in Complera [®] , Odefsey [®] , Juluca [®])	• Concurrent use at standard doses appropriate.
 Rilpivirine injection (in Cabenuva[®]) 	 If using tenofovir disoproxil fumarate in combination with
• Doravirine (Pifeltro [®] ; in Delstrigo [®])	glecaprevir/pibrentasvir, monitor for tenofovir-associated adverse reactions.

Glecaprevir/Pibrentasvir (Mavyret™) Drug Interactions with HIV Medications, continued

Concurrent Medication	Recommendation and Clinical Comments	
HIV Integrase Strand Transfer Inhibitors		
 Bictegravir/tenofovir alafenamide/emtricitabine (Biktarvy[®]) 	Concurrent use at standard doses appropriate.	
 Cabotegravir oral (Vocabria[®]) 	 If using tenofovir disoproxil fumarate in combination with 	
 Cabotegravir injection (Apretude[®]; in Cabenuva[®]) 	glecaprevir/pibrentasvir, monitor for tenofovir-associated adverse	
 Dolutegravir (Tivicay[®]; in Dovato[®], Triumeq[®], Juluca[®]) 	reactions.	
 Elvitegravir/cobicistat/tenofovir alafenamide/emtricitabine 		
(Genvoya®)		
 Elvitegravir/cobicistat/tenofovir disoproxil 		
fumarate/emtricitabine (Stribild®)		
• Raltegravir (Isentress [®] , Isentress HD [®])		
HIV Nucleoside/Nucleotide Reverse Transcriptase Inhibitors		
 Abacavir (Ziagen[®], in Epzicom[®], Triumeq[®], other STRs) 	Concurrent use at standard doses appropriate.	
 Emtricitabine (Emtriva[®], in other STRs) 	 If using tenofovir disoproxil fumarate in combination with 	
 Lamivudine (Epivir[®], in other STRs) 	glecaprevir/pibrentasvir, monitor for tenofovir-associated adverse	
 Tenofovir Disoproxil Fumarate (Viread[®]; in Cimduo[®], 	reactions.	
Temixys [®] , Truvada [®] , other STRs)		
• Tenofovir Alafenamide (in Descovy [®] , other STRs)		
HIV Entry Inhibitors, CCR5 Antagonists, gp120-Directed Attachment Inhibitors		
• Fostemsavir (Rukobia [®])	• Concurrent use at standard doses appropriate.	
• Maraviroc (Selzentry [®])		
• Ibalizumab (Trogarzo®)		
HIV Capsid Inhibitor		
• Lenacapavir (Sunlenca)	Concurrent use at standard doses appropriate.	

Glecaprevir/Pibrentasvir (Mavyret[™]) Drug Interactions with Common Primary Care Medications

Medication and or Class	Recommendation and Clinical Comments
• Antiarrhythmic – Digoxin	 Increased digoxin levels expected. Measure serum digoxin level prior to initiating therapy with glecaprevir/pibrentasvir; reduce digoxin dosage 50% or adjust dosing frequency and continue monitoring.
 Anticoagulant – Dabigitran 	 Refer to dabigatran package insert and follow dosage recommendations for patients receiving concurrent P-gp inhibitors in the setting of renal impairment.
 Anticonvulsants – carbamazepine 	 Significant decrease in glecaprevir/pibrentasvir levels expected. Co-administration not recommended.
 Antimycobacterials – rifampin 	 Significant decrease in glecaprevir/pibrentasvir levels expected. Co-administration contraindicated.
• Ethinyl Estradiol	 Potential increased risk of ALT elevations when glecaprevir/pibrentasvir is combined with ethinyl estradiol. Co-administration not recommended.
• Herbal products – St. John's Wort	 Significant decrease in glecaprevir/pibrentasvir levels expected. Co-administration not recommended.
 HMG-CoA Reductase Inhibitors – atorvastatin, lovastatin, simvastatin 	• Significant increase in statin levels when combined with glecaprevir/pibrentasvir. Co- administration not recommended.
• HMG-CoA Reductase Inhibitors – fluvastatin, pitavastatin, pravastatin, rosuvastatin	 Fluvastatin, pitavastatin – Increase statin levels likely when used with glecaprevir/ pibrentasvir; Use lowest dose and monitor closely for statin toxicity, including myopathy. Pravastatin – Increased statin levels likely when used with glecaprevir/pibrentasvir. Reduce pravastatin dosage 50% prior to adding glecaprevir/pibrentasvir.
	 Rosuvastatin – Increased statin levels likely when used with glecaprevir/pibrentasvir. Do not exceed rosuvastatin 10mg when combined.
 Immunosuppressants – cyclosporine 	 Increased levels of cyclosporine expected when combined with glecaprevir/pibrentasvir. Co- administration not recommended in patients requiring cyclosporine doses greater than 100mg daily.

Disclaimer: The information contained in this table has been developed from various resources, including FDA product information, abstracts and posters presented at national and 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 tables 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 caution. Please consult additional resources as needed.

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