## ART Drug-Drug Interactions

*Updated February 2021*

### Table 8: Doravirine (DOR) Interactions (also see drug package inserts)

<table>
<thead>
<tr>
<th>Class or Drug</th>
<th>Mechanism of Action</th>
<th>Clinical Comments</th>
</tr>
</thead>
</table>
| Strong inducers or inhibitors of CYP3A [Deeks 2018] | DOR is a substrate of CYP3A, and as such, drugs that affect its metabolism affect its concentrations. | • Avoid concomitant use if possible.  
• Dose adjustments of DOR are not recommended.  
• Consider alternative concomitant agents. |
| Carbamazepine, oxcarbazepine, phenobarbital, phenytoin | Coadministration may significantly reduce concentrations of ARV agents through induction of CYP450 system. | • Coadministration is not recommended; use alternative anticonvulsant.  
• If benefit of use outweighs risk, monitor carefully for efficacy and toxicity.  
• Perform therapeutic drug monitoring if use cannot be avoided. |

**Abbreviations:** ARV, antiretroviral agents; CYP, cytochrome P450.  
**No significant interactions/no dose adjustments necessary:** Common oral antibiotics (Table 15); drugs used as antihypertensive agents (Table 16); anticoagulants (Table 17); antiplatelet drugs (Table 18); statins (Table 19); antidiabetic drugs (Table 20); polyvalent cations (Table 22); asthma and allergy medications (Table 23); long-acting beta agonists (Table 24); inhaled and injected corticosteroids (Table 25); antidepressants (Table 26); benzo diazepines (Table 27); sleep medications (Table 28); antipsychotics (Table 28); non-opioid pain medications (Table 31); opioid analgesics and tramadol (Table 32); hormonal contraceptives (Table 33); erectile and sexual dysfunction agents (Table 34); tobacco and smoking cessation products (Table 35); alcohol, disulfiram, and acamprosate (Table 36); methadone, buprenorphine, naloxone, and naltrexone (Table 37); immunosuppressants (Table 38); gender-affirming hormones (Table 40).