



## ART Drug-Drug Interactions: Maraviroc (MVC) Interactions

October 2022

Table 18: Maraviroc (MVC) Interactions (also see drug package inserts)		
Class or Drug	Mechanism of Action	Clinical Comments
Potent CYP3A4 or P-gP inducers (St. John's wort)	Reduced MVC levels are due to CYP3A4 induction.	Do not coadminister.
COVID-19 therapeutics	<ul style="list-style-type: none"> <li>• <b>Molnupiravir and monoclonal antibodies</b> do not affect CYP450, P-gP, or other drug metabolism transporters.</li> <li>• <b>Nirmatrelvir/RTV:</b> Inhibition of CYP3A4, P-gP, and other transporters may increase plasma concentrations of other medications.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Molnupiravir:</b> Drug interactions are unlikely.</li> <li>• <b>Nirmatrelvir/RTV:</b> Drug interactions are unlikely; MVC levels may increase.</li> </ul>
Mpox treatments [a]	<b>Tecovirimat</b> is a weak inducer of CYP3A and a weak inhibitor of CYP2C8 and CYP2C19.	<b>Tecovirimat</b> may reduce MVC levels, though effects are not likely to be clinically relevant. No dose adjustment in either drug is necessary.

**Abbreviations:** AUC, area under the curve; CYP, cytochrome P450; P-gP, P-glycoprotein; RTV, ritonavir.

**Note:**

a. No data are currently available on effects related to concurrent use of tecovirimat and HIV medications. However, [midazolam AUC was reduced by 32% with concomitant tecovirimat use](#), and some experts recommend caution due to the mild CYP3A4 induction associated with tecovirimat. Among them is [University of Liverpool HIV Drug Interactions](#), which makes the following dosing change recommendations, although they are not based on any clinical data: Increase dose to 600 mg twice daily (if the patient is not taking another potent CYP3A4 inhibitor concurrently) for the duration of tecovirimat treatment and for 2 weeks after tecovirimat is stopped. If the patient is receiving concomitant treatment with a potent CYP3A4 inhibitor, MVC should be dosed at 150 mg twice daily for the duration of concurrent tecovirimat.

**No significant interactions/no dose adjustments necessary:** Common oral antibiotics (Table 19); drugs used as antihypertensive medicines (Table 20); antidiabetic drugs (Table 24); acid-reducing agents (Table 25); polyvalent cations (Table 26); inhaled and injected corticosteroids (Table 29); benzodiazepines (Table 31); sleep medications (Table 32); nonopioid pain medications (Table 35); opioid analgesics and tramadol (Table 36); alpha-adrenergic antagonists for benign prostatic hyperplasia (Table 39); tobacco and smoking cessation products (Table 40); alcohol, disulfiram, and acamprosate (Table 41); methadone, buprenorphine, naloxone, and naltrexone (Table 42); gender-affirming hormones (Table 47).