



CLINICAL GUIDELINES PROGRAM

NEW YORK STATE DEPARTMENT OF HEALTH AIDS INSTITUTE | HIV • HCV • SUBSTANCE USE • LGBT HEALTH

Resource: ART Drug-Drug Interactions

April 2023

Table 14: Abacavir (ABC) Interactions (also see drug package inserts)

Class or Drug	Mechanism of Action	Clinical Comments
Alcohol [Yuen, et al. 2008; McDowell, et al. 2000]	ABC is metabolized via alcohol dehydrogenase, and competitive metabolism may increase exposure to ABC.	<ul style="list-style-type: none">Use may increase ABC concentrations; monitor for ABC-related adverse effects.ABC does not appear to increase blood alcohol concentrations.
Rifabutin, rifampin, rifapentine	<ul style="list-style-type: none">Rifabutin, rifapentine: No clinically significant interactions are expected.Rifampin may reduce ABC concentration.	<ul style="list-style-type: none">Rifabutin, rifapentine: No dose adjustments are necessary.Rifampin: No dose adjustments are recommended for concomitant use with ABC.
Mpox treatments	Cidofovir is eliminated via glomerular filtration and active renal secretion by OAT1 and OAT3.	<ul style="list-style-type: none">Cidofovir: Avoid coadministration with nephrotoxic agents. Consider use of TAF in place of TDF and monitor for renal-related adverse effects.Brincidofovir, tecovirimat, VIGIV: Drug interactions are unlikely.

Abbreviations: OAT, organic anion transporter; TAF, tenofovir alafenamide; TDF, tenofovir disoproxil fumarate; VIGIV, vaccinia immune globulin intravenous.

No significant interactions/no dose adjustments necessary: Common oral antibiotics (Table 19); drugs used as antihypertensive medicines (Table 20); anticoagulants (Table 21); antiplatelet drugs (Table 22); statins (Table 23); antidiabetic drugs (Table 24); acid-reducing agents (Table 25); polyvalent cations (Table 26); asthma and allergy medications (Table 27); long-acting beta agonists (Table 28); inhaled and injected corticosteroids (Table 29); antidepressants (Table 30); benzodiazepines (Table 31); sleep medications (Table 32); antipsychotics (Table 33); anticonvulsants (Table 34); nonopioid pain medications (Table 35); opioid analgesics and tramadol (Table 36); hormonal contraceptives (Table 37); erectile and sexual dysfunction agents (Table 38); alpha-adrenergic antagonists for benign prostatic hyperplasia (Table 39); tobacco and smoking cessation products (Table 40); methadone, buprenorphine, naloxone, and naltrexone (Table 42); immunosuppressants (Table 43); COVID-19 therapeutics (Table 45); gender-affirming hormones (Table 47).

References

- McDowell JA, Chittick GE, Stevens CP, et al. Pharmacokinetic interaction of abacavir (1592U89) and ethanol in human immunodeficiency virus-infected adults. *Antimicrob Agents Chemother* 2000;44(6):1686-90. [PMID: 10817729] <https://pubmed.ncbi.nlm.nih.gov/10817729>
- Yuen GJ, Weller S, Pakes GE. A review of the pharmacokinetics of abacavir. *Clin Pharmacokinet* 2008;47(6):351-71. [PMID: 18479171] <https://pubmed.ncbi.nlm.nih.gov/18479171>