**All Interactions with Nevirapine (Viramune)**

| **Coadministered Drug** | **Dose of Drug** | **Dose of Nevirapine** | **Effect on Drug Levels** | **Effect on Nevirapine Levels** | **Potential Clinical Effects** | **Mechanism of Interaction** | **Management** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Amprenavir[60](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#60)  (APV)(Agenerase) | - | - | May decrease amprenavir levels | - | Decreased amprenavir effects | Induction of CYP450 3A4 by nevirapine | Dose adjustment not established |
| Artemether[593](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#593)  (Coartem) | artemether/lumefantrine 80/480 mg | - | Artemether AUC: decreased 72%; Cmax: decreased 61%; Lumefantrine AUC: decreased 21%; Cmax: decreased 30% | Nevirapine AUC: decreased 46%; Cmax: decreased 42% | Potentially increased treatment failure | - | Do not coadminister; avoid arthemether/lumefantrine in patients receiving nevirapine if at all possible |
| Atazanavir  (ATV)(Reyataz) | 300 mg atazanavir QD with 100 mg ritonavir QD | 200 mg BID | Atazanavir AUC: decreased 42%; Cmax: decreased 28%; Cmin: decreased 72% | Nevirapine AUC: increased 25%; Cmax: increased 17%; Cmin: increased 32% | Decreased atazanavir effects | Induction of CYP4450 3A4 by nevirapine | Do not coadminister |
| Atazanavir  (ATV)(Reyataz) | 400 mg atazanavir QD with 100 mg ritonavir QD | 200 mg BID | Atazanavir AUC: decreased 19%; Cmax: no significant change; Cmin: decreased 59% | Nevirapine AUC: increased 26%; Cmax: increased 21%; Cmin: increased 35% | Decreased atazanavir effects | Induction of CYP450 3A4 by nevirapine | Do not coadminister |
| Chlorpropamide[469](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#469)  (others)(Diabinese) | 250 mg x 1 | 200 mg x 1 | No significant change | - | - | - | - |
| **Coadministered Drug** | **Dose of Drug** | **Dose of Nevirapine** | **Effect on Drug Levels** | **Effect on Nevirapine Levels** | **Potential Clinical Effects** | **Mechanism of Interaction** | **Management** |
| Cimetidine[95](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#95)  (Tagamet)(Tagamet) | - | - | - | Cmin: increased 21% | - | Inhibition of CYP450 3A4 by cimetidine | No dose adjustment necessary |
| Clarithromycin[362](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#362),[95](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#95)  (Biaxin) | 500 mg BID | 200 mg QD x 2 weeks then 200 BID | Clarithromycin AUC: decreased 29%; Cmax: decreased 20%; Cmin: decreased 46%; 14-hydroxy clarithromycin AUC: increased 27% | Nevirapine Cmin: no significant change | - | - | No dose adjustment necessary |
| Darunavir[537](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#537),[161](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#161)  (DRV)(Prezista) | 400 mg BID with ritonavir 100 mg BID | 200 mg BID | Darunavir AUC: increased 24%; Cmax: increased 40% | Nevirapine AUC: increased 27%; Cmax: increased 18%; Cmin: increased 47% | Possibly increased darunavir effects; possibly increased nevirapine effects | - | No dose adjustment necessary |
| Dasabuvir, Ombitasvir/Paritaprevir/Ritonavir[727](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#727)  (Viekira) | - | - | - | - | Potential decrease in HCV agent efficacy | CYP3A4 induction by nevirapine | Do not coadminister |
| Didanosine[95](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#95)  (ddI)(Videx) | - | - | Not studied | No significant change | - | - | No dose adjustment necessary |
| Didanosine[143](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#143)  (ddI)(Videx) | - | - | - | - | Potential early virologic failure | - | Use caution when coadministering tenofovir, didanosine and either efavirenz or nevirapine in treatment-naive patients |
| **Coadministered Drug** | **Dose of Drug** | **Dose of Nevirapine** | **Effect on Drug Levels** | **Effect on Nevirapine Levels** | **Potential Clinical Effects** | **Mechanism of Interaction** | **Management** |
| Dolutegravir[691](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#691)  (Tivicay) | 50 mg QD | 200 mg QD; 200 mg BID; 400 mg QD (XR formulation) | Dolutegravir AUC: decreased 19%; Cmin: decreased 34% | - | - | - | No dose adjustment necessary |
| Efavirenz[93](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#93)  (EFV)(Sustiva) | 600 mg QD | 200 mg QD x 2 weeks, then 400 mg QD | Efavirenz AUC: decreased 22%; Cmin: decreased 36% | No significant change | Decreased efavirenz effects | Induction of CYP450 3A4 by nevirapine | Monitor and adjust therapy as indicated; may consider increasing efavirenz to 800 mg QD |
| Elbasvir/grazoprevir[733](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#733),[727](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#727)  (Zepatier) | - | - | - | - | Decreased elbasvir, grazoprevir levels expected | Expected CYP3A4 induction by nevirapine | Contraindicated: do not coadminister. Minimal or no data to guide interaction. Risks likely to outweigh benefits. |
| Elvitegravir/cobicistat[639](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#639)  (Stribild) | - | - | - | - | Potentially decreased or increased elvitegravir, cobicistat and/or nevirapine effects | - | Do not coadminister |
| Ergotamine[577](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#577)  (Cafergot, Ergot derivatives)(Cafergot, others) | - | - | - | - | Ergotamine levels may be decreased | Potential induction of CYP450 3A by nevirapine | Use with caution |
| Ethinyl estradiol/norethindrone acetate[370](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#370)  (others)(Ortho-Novum) | Ethinyl estradiol 0.035 mg/Norethindrone 1 mg QD x 30 days | 200 mg BID x 30 days | Ethinyl estradiol: AUC decreased 23%; half-life: decreased 44%; Norethindrone: AUC decreased 18%; half-life: decreased 15% | No significant change | Possible contraceptive failure | Induction of CYP450 3A4 by nevirapine | Avoid coadministration; additional contraceptive measures may be needed |
| **Coadministered Drug** | **Dose of Drug** | **Dose of Nevirapine** | **Effect on Drug Levels** | **Effect on Nevirapine Levels** | **Potential Clinical Effects** | **Mechanism of Interaction** | **Management** |
| Ethinyl estradiol/norethindrone acetate[369](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#369),[95](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#95)  (others)(Ortho-Novum) | Ethinyl estradiol 0.035 mg/Norethindrone 1 mg x 1 dose | 200 mg QD x 2 weeks then 200 mg BID | Ethinyl estradiol AUC: decreased 19%; Cmax: no significant changeNorethindrone AUC: decreased 18% | No significant change | Possible contraceptive failure | Induction of CYP450 3A4 by nevirapine | Use alternative contraceptive method  *Alternative Agents*:  **Barrier devices; Condoms** |
| Etravirine[407](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#407)  (ETR)(Intelence) | - | - | Etravirine AUC: decreased 55% | - | Decreased etravirine and nevirapine effects | - | - |
| Fluconazole[269](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#269)  (Diflucan)(Diflucan) | 200 mg QD x 40 days | 200 mg QD x 14 days then 200 mg BID | No significant change | Nevirapine AUC: increased 110%; Cmax: increased 115%; Cmin: increased 135%; half-live: decreased 52% (data compared to historical controls) | Increased nevirapine effects | Possible inhibition of CYP450 3A4 by fluconazole | Dose adjustment not established |
| Fluconazole[427](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#427)  (Diflucan)(Diflucan) | 200 mg three times weekly | 200 mg BID | - | Nevirapine AUC: increased 33%; Cmin: increased 38%; Cmax: increased 26% | Possibly increased nevirapine effects | Inhibition of CYP450 3A4 by fluconazole | No dose adjustment necessary |
| Fosamprenavir[146](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#146)  (FPV)(Lexiva) | 1400 mg BID | 200 mg BID | Fosamprenavir AUC: decreased 33%; Cmax: decreased 25%; Cmin: decreased 35% | Nevirapine AUC: increased 29%; Cmax: increased 25%; Cmin: increased 34% | Decreased fosamprenavir effects | Induction of CYP450 3A4 by nevirapine | Do not coadminister  *Alternative Agents*:  **Consider ritonavir-boosted fosamprenavir** |
| Fosamprenavir[146](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#146)  (FPV)(Lexiva) | 700 mg fosamprenavir BID with 100 mg ritonavir BID | 200 mg BID | No significant change | Nevirapine Cmin: increased 22% | - | Induction of CYP450 3A4 by nevirapine; inhibition of CYP450 3A4 by ritonavir | No dose adjustment necessary |
| **Coadministered Drug** | **Dose of Drug** | **Dose of Nevirapine** | **Effect on Drug Levels** | **Effect on Nevirapine Levels** | **Potential Clinical Effects** | **Mechanism of Interaction** | **Management** |
| Indinavir[254](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#254),[29](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#29),[30](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#30),[31](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#31),[32](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#32)  (IDV)(Crixivan) | 800 mg Q8H | 200 mg BID | Indinavir AUC: decreased 28%; Cmax: decreased 11% | No significant change | Decreased indinavir effects | Induction of CYP450 3A4 by nevirapine | Increase indinavir to 1000 mg Q8H |
| Indinavir[95](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#95)  (IDV)(Crixivan) | 800 mg Q8H | 200 mg QD x 2 weeks, 200 mg BID x 28 days | Indinavir AUC: decreased 28%; Cmax: no significant change | Not studied | Decreased indinavir effects | Induction of CYP450 3A4 by nevirapine | Increase indinavir to 1000 mg Q8H |
| Ketoconazole[95](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#95)  (Nizoral) | 400 mg QD x 2 weeks | 200 mg QD x 2 weeks then 200 mg BID x 2 weeks | Ketoconazole AUC: decreased 63%; Cmax: decreased 40% | Levels: increased 15-30% | Decreased ketoconazole effects | Induction of CYP450 3A4 by nevirapine | Do not coadminister |
| Lopinavir/ritonavir[78](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#78)  (LPV/r)(Kaletra) | 300 mg/75 mg/square meter BID x 3 weeks | 7 mg/kg or 4 mg/kg QD x 2 weeks; BID x 1 week | Lopinavir AUC: decreased 22%; Cmax: no significant change; Cmin: decreased 55% | - | Decreased lopinavir/ritonavir effects | Induction of CYP450 3A4 by nevirapine | Increase dose of lopinavir/ritonavir to 6.5 mL BID with food |
| Lopinavir/ritonavir[78](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#78)  (LPV/r)(Kaletra) | 400 mg/100 mg BID x 20 days | 200 mg QD x 14 days, 200 mg BID x 6 days | Lopinavir: no significant change | Nevirapine AUC: no significant change; Cmax: no significant change; Cmin: increased 15% | Though study does not suggest need to increase lopinavir/ritonavir dose, other evidence indicated decreased lopinavir/ritonavir effects | Induction of CYP450 3A4 by nevirapine | Increase dose of lopinavir/ritonavir to 533 mg/133 mg (4 capsules) BID with food |
| Lumefantrine[455](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#455)  (Coartem) | Artemether/lumefantrine 80 mg/480 mg x 6 doses | 200 mg BID | Lumefantrine AUC: increased 56%; Cmax: increased 24%; half-life: no significant change; clearance: decreased 36% | Not studied | - | Unknown | No dose adjustment necessary |
| **Coadministered Drug** | **Dose of Drug** | **Dose of Nevirapine** | **Effect on Drug Levels** | **Effect on Nevirapine Levels** | **Potential Clinical Effects** | **Mechanism of Interaction** | **Management** |
| Lumefantrine[593](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#593)  (Coartem) | artemether/lumefantrine 80/480 mg | - | Lumefantrine AUC: decreased 21%; Cmax: decreased 30% | Nevirapine AUC: decreased 46%; Cmax: decreased 42% | Potentially increased treatment failure | - | Do not coadminister; avoid arthemether/lumefantrine in patients receiving nevirapine if at all possible |
| Maraviroc[2](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#2)  (MVC)(Selzentry) | 300 mg | 200 mg BID | Maraviroc Cmax: increased 54% | - | - | - | Increase maraviroc dose to 300 mg BID |
| Medroxyprogesterone acetate[393](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#393)  (Depo-Provera) | 150 mg | - | Progesterone levels: no significant change | Nevirapine AUC: no significant change | - | - | No dose adjustment necessary |
| Methadone[186](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#186)  (Dolophine)(Dolophine) | stable dose | unknown | Not reported | Nevirapine AUC: decreased 40% | Decreased methadone effects | Induction of CYP450 3A4 by nevirapine | Monitor for signs and symptoms of methadone withdrawal; some patients may need an increase in the methadone dose |
| Methadone[183](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#183)  (Dolophine)(Dolophine) | stable dose: racemic methadone 35-220 mg daily; (R)-methadone 45-115 mg daily | 200 mg QD x 14 days, then 200 mg BID thereafter | racemic methadone AUC: decreased 37%; (R)-methadone AUC: decreased 44% | - | Decreased methadone effects (eg, withdrawal) | Possible induction of CYP450 2B6 by nevirapine | Monitor for signs and symptoms of methadone withdrawal; some patients may need an increase in the methadone dose |
| Methadone[210](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#210)  (Dolophine)(Dolophine) | Stable methadone dose | 200 mg QD x 14 days | Methadone AUC: decreased 51%; Cmax: decreased 36% | Not studied | Decreased methadone effects (eg, methadone withdrawal) | Induction of CYP450 3A4 by nevirapine | Monitor for signs and symptoms of methadone withdrawal; some patients may need an increase in the methadone dose |
| **Coadministered Drug** | **Dose of Drug** | **Dose of Nevirapine** | **Effect on Drug Levels** | **Effect on Nevirapine Levels** | **Potential Clinical Effects** | **Mechanism of Interaction** | **Management** |
| Methadone[207](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#207),[208](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#208),[209](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#209),[95](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#95)  (Dolophine)(Dolophine) | Stable methadone maintenance | 200-400 mg QD | Methadone AUC: decreased 46% | Not studied | Decreased methadone effects (eg, methadone withdrawal; interaction observed one week into therapy | Induction of CYP450 3A4 by nevirapine | Monitor for signs and symptoms of methadone withdrawal; some patients may need an increase in the methadone dose |
| Mycophenolate[312](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#312)  (CellCept)(CellCept) | 500 mg BID x 8 weeks | 200 mg BID | Not studied | Clearance: increased 27% | - | - | Dose adjustment not established |
| Nelfinavir[24](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#24),[73](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#73),[74](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#74)  (NFV)(Viracept) | 750 mg TID x 36 days | 200 mg QD x 14 days, 200 mg BID x 14 days | No significant change | Not studied | - | - | No dose adjustment necessary |
| Paclitaxel[174](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#174)  (Taxol) | 100 mg/square meter infusion over 3 hours | 200 mg BID | Not studied | No significant change | - | - | No dose adjustment necessary |
| Rifabutin[95](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#95)  (Mycobutin)(Mycobutin) | - | - | Not studied | Nevirapine Cmin: decreased 16% | Decreased nevirapine effects | Induction of CYP450 3A4 by rifabutin | No dose adjustment necessary |
| Rifampin[95](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#95),[351](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#351)  (Rifampicin)(Rifadin) | - | - | Not studied | Nevirapine Cmin: decreased 37% | Decreased nevirapine effects | Induction of CYP450 3A4 by rifampin | Avoid if possible  *Alternative Agents*:  **Rifabutin** |
| **Coadministered Drug** | **Dose of Drug** | **Dose of Nevirapine** | **Effect on Drug Levels** | **Effect on Nevirapine Levels** | **Potential Clinical Effects** | **Mechanism of Interaction** | **Management** |
| Rifampin[347](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#347)  (Rifampicin)(Rifadin) | 450 mg if &lt; 55 kg and 600 mg if &gt; 55 kg x 7 days | 200 mg x 1 | - | Nevirapine AUC: decreased 79%; Cmax: decreased 20%; Cmin: decreased 60%; half-life: decreased 66% | Decreased nevirapine effects | Induction of CYP450 3A4 by rifampin | Do not coadminister  *Alternative Agents*:  **Rifabutin** |
| Rifampin  (Rifampicin)(Rifadin) | 600 mg QD | 200 mg BID | - | Nevirapine AUC: decreased 27% (at week 4); Nevirapine AUC: no significant change (at week 10)Nevirapine AUC with rifampicin approximates nevirapine baseline without rifampicin at week 10. | Decreased nevirapine effects | - | Regimen most appropriate for countries where rifabutin is not available; Avoid nevirapine and rifampicin/rifampin if rifabutin is available (rifabutin preferred agent)  *Alternative Agents*:  **Rifabutin** |
| Rifampin[356](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#356),[351](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#351)  (Rifampicin)(Rifadin) | 600 mg QD | 200 mg BID | No significant change | Nevirapine AUC: decreased 31%; Cmax: decreased 36%; Cmin: decreased 21% | Decreased nevirapine effects | Induction of CYP450 3A4 by rifampin | Avoid if possible  *Alternative Agents*:  **Rifabutin** |
| Ritonavir[95](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#95)  (RTV)(Norvir) | 600 mg BID | 200 mg QD x 2 weeks then 200 mg BID x 28 days | No significant change | No significant change | - | - | No dose adjustment necessary |
| Saquinavir[95](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#95)  (SQV)(Fortovase, Invirase) | 600 mg (hard gel caps) TID | 200 mg QD x 2 weeks then 200 mg BID x 28 days | Saquinavir AUC: decreased 24%; Cmax: decreased 28% | No significant change | Decreased saquinavir effects | Induction of CYP450 3A4 by nevirapine | Dose adjustment not established |
| Saquinavir[44](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#44)  (SQV)(Fortovase, Invirase) | 600 mg (hard gel caps) TID x 7 days | 200 mg BID x 21 days | Saquinavir AUC: decreased 24%; Cmax: decreased 28% | No significant change | May decrease saquinavir effects | Induction of CYP450 by nevirapine | Dose adjustment not established |
| **Coadministered Drug** | **Dose of Drug** | **Dose of Nevirapine** | **Effect on Drug Levels** | **Effect on Nevirapine Levels** | **Potential Clinical Effects** | **Mechanism of Interaction** | **Management** |
| St. John's Wort[174](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#174)  (Hypericum perforatum, hypericin, hyperforin) | - | 200 mg BID | - | Clearance: increased 35% | Decreased nevirapine effects | Induction of CYP450 3A4 by St. John's Wort | Do not coadminister |
| Tenofovir disoproxil fumarate[143](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#143)  (TDF)(Viread) | - | - | - | - | Potential early virologic failure | - | Use caution when coadministering tenofovir, didanosine and either efavirenz or nevirapine in treatment naive patients |
| Tipranavir[154](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#154)  (TPV)(Aptivus) | 1250 mg BID with 100 mg ritonavir BID x 42 doses | 200 mg BID x 43 doses | - | Nevirapine AUC: decreased 24%; Cmax: decreased 29%; Cmin: decreased 23% | Possible decreased nevirapine effects | Possible induction of CYP450 3A4 by tipranavir/ritonavir | Dose adjustment not established |
| Tipranavir[154](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#154)  (TPV)(Aptivus) | 250 mg BID with 200 mg ritonavir BID | 200 mg BID x 43 doses | - | No significant change | - | - | No dose adjustment necessary |
| Tipranavir[154](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#154)  (TPV)(Aptivus) | 750 mg BID with 100 mg ritonavir BID | 200 mg BID x 43 doses | - | No significant change | - | - | No dose adjustment necessary |
| Warfarin[95](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#95)  (Coumadin) | - | - | - | - | Possibly decreased warfarin effects (eg, altered INR, increased risk of clotting) | - | Monitor INR and adjust warfarin as indicated |
| Zalcitabine[95](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#95)  (ddC)(Hivid) | - | - | Not studied | No significant change | - | - | No dose adjustment necessary |
| Zidovudine[95](http://arv.ucsf.edu/insite?page=ar-00-02&param=19&post=4#95)  (AZT, ZDV)(Retrovir) | - | - | - | No significant change | - | - | No dose adjustment necessary |
| "-" indicates that there are no data available | | | | | | | |

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