Hepatitis C Direct-Acting Antiviral Concomitant Therapy Guide for Transplant Recipients

Recommendations reflect FDA-approved drug label except where noted otherwise
Patient specific risk/benefit considerations are to be assessed by the provider prior to medication adjustments

<table>
<thead>
<tr>
<th>GERD therapy¹</th>
<th>Mavyret (glecaprevir/pibrentasvir)</th>
<th>Epclusa (sofosbuvir/velpatasvir)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proton pump inhibitors (PPI) (omeprazole, pantoprazole, esomeprazole, lansoprazole)</td>
<td>PPI coadministration at max daily dose 20 mg per local practice²</td>
<td>Coadministration not recommended IF medically necessary Epclusa should be taken 4 hours before omeprazole (at max daily dose 20 mg). Other PPIs have not been studied</td>
</tr>
<tr>
<td>H₂-receptor antagonists (ranitidine, famotidine)</td>
<td>No adjustment necessary</td>
<td>Administer simultaneously or 12 hours apart</td>
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<tr>
<td>Antacids (TUMS, Maalox)</td>
<td></td>
<td>Separate administration by 4 hours</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Statin therapy³</th>
<th>Mavyret (glecaprevir/pibrentasvir)</th>
<th>Epclusa (sofosbuvir/velpatasvir)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Atorvastatin (Lipitor)</td>
<td>Coadministration not recommended</td>
<td>No adjustment necessary</td>
</tr>
<tr>
<td>Lovastatin (Altoprev)</td>
<td></td>
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<tr>
<td>Simvastatin (Zocor)</td>
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<tr>
<td>Pravastatin (Pravachol)</td>
<td>Reduce dose by 50% when co-administered</td>
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<tr>
<td>Rosuvastatin (Crestor)</td>
<td>Max dose 10 mg daily when co-administered</td>
<td>Max dose 10 mg daily when co-administered</td>
</tr>
</tbody>
</table>

¹ Drugs that increase gastric pH are expected to decrease concentration of velpatasvir and glecaprevir
² PPI coadministration reviewed at Liver QAPI (2/2019); team approved Mavyret with any PPI as long as PPI dose < 20 mg/day
³ Coadministration may increase concentration of statin, increasing the risk of myopathy, including rhabdomyolysis