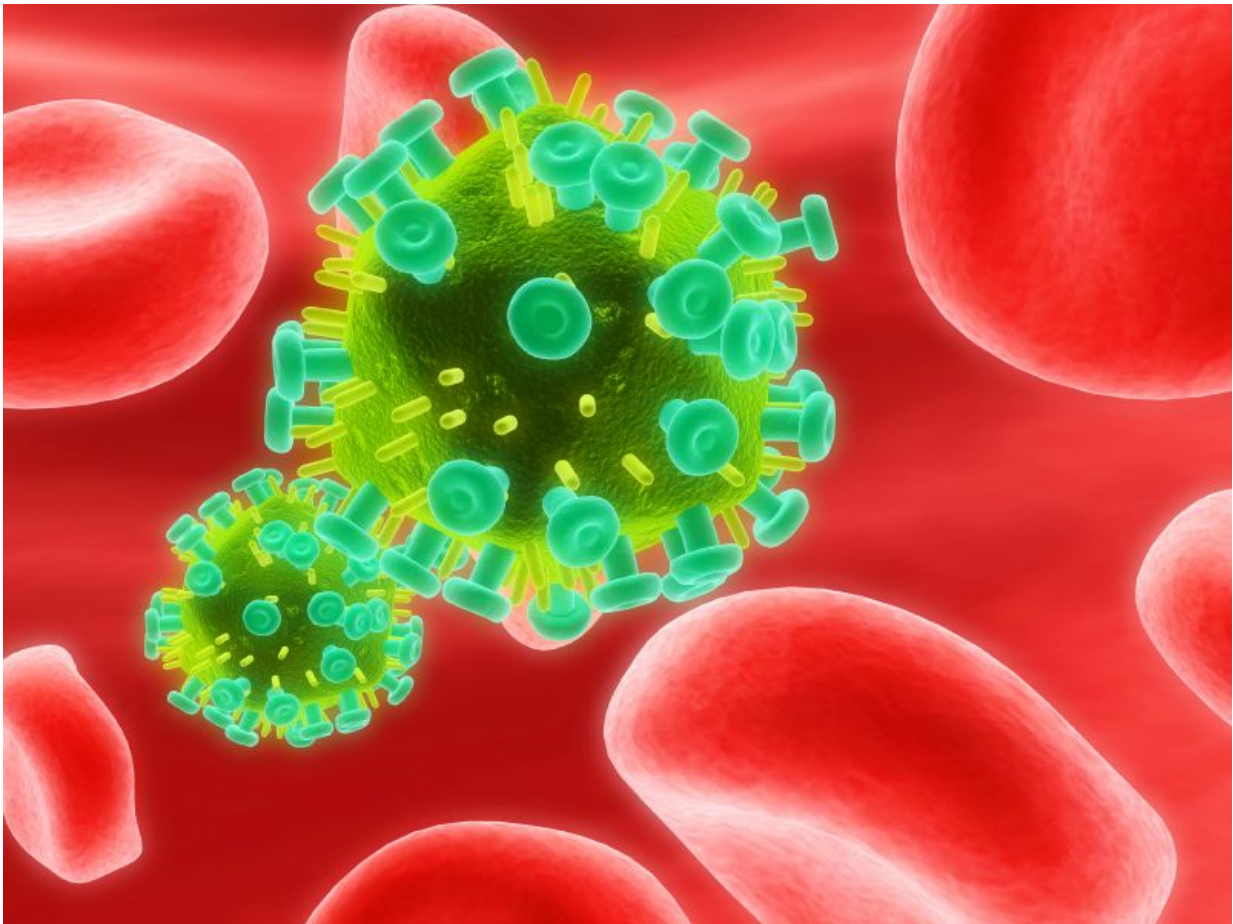


# Interactions for HIV drug combos, immunosuppressants

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(HealthDay)—HIV-positive transplant recipients and their physicians

should be aware of potential interactions between fixed dose combination products used for HIV treatment and immunosuppressant metabolism, according to a case report published online April 18 in the *American Journal of Transplantation*.

Noting that fixed dose combination products are frequently given for HIV, Samir J. Patel, Pharm.D., from the Houston Methodist Hospital, and colleagues describe a case of drug interaction-induced calcineurin inhibitor nephrotoxicity in a renal transplant recipient who was being started on a cobicistat-containing combination product for HIV.

The 38-year-old male patient was four years post-kidney transplant and presented after a week-long history of nausea, vomiting, severe headaches, and visual disturbances; he had been diagnosed as HIV-positive two months before admission. On admission, his tacrolimus level was >30 mg/mL. The patient was initiated on phenytoin to hasten tacrolimus clearance. Phenytoin was continued for three days (three doses per day). To maintain tacrolimus levels in the range of 4 to 6 ng/mL, the patient required tacrolimus 0.5 mg twice weekly.

"This case underscores the importance of familiarity with newer combination products on the market and constant communication with HIV positive [transplant](#) recipients and their providers," the authors write.

**More information:** [Abstract](#)  
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