

Interaction Report**Report ID:****Date Produced:**

03 May 2025

Hepatology Treatment**Co-medications**

Bulevirtide

Brincidofovir

This report lists the summaries of potential interactions (i.e. "red", "amber" and "yellow" classifications) for the drugs in the table above.

Interactions with a "green" or "grey" classification (i.e. no clinically significant interaction or no clear data) have been checked and are listed at the end of this report, but summaries are not shown. Please note that some co-medications with a green classification may require dose adjustment due to hepatic impairment.

For full details of all interactions, see www.hepatology-druginteractions.org.

Description of the interactions

Potential weak interaction - additional action/monitoring or dosage adjustment is unlikely to be required (YELLOW)

Bulevirtide + Brincidofovir

Coadministration has not been studied. Brincidofovir is a substrate of OATP1B1/3 and NTCP. Bulevirtide is catabolized by peptidases and elimination occurs through binding to NTCP. A clinical interaction study of high-dose bulevirtide (administered at 5 mg twice daily) showed a 1.34-fold increase of C_{max} and AUC of pravastatin (40 mg single dose) a substrate of OATP1B1/3 and NTCP. When bulevirtide is prescribed at the recommended dose of 2mg, the risk for clinically relevant interactions with OATP1B1/3 and/or NTCP substrates is considered low. However, to minimise the risk of interaction further, dosing of bulevirtide could be separated by at least 3 hours after brincidofovir administration.