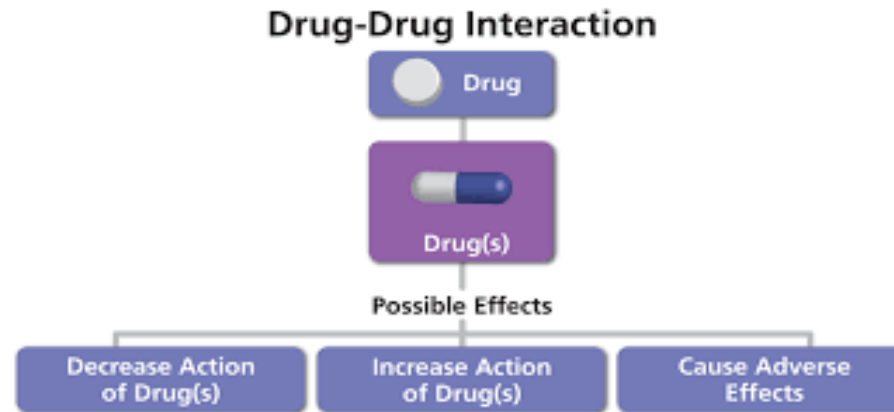




Interactions



- CNS depressants
- QT prolonging medications
- Opioid antagonists
- Partial agonists
- Antibiotics e.g. clarithromycin and erythromycin
- Antifungals e.g. Ketoconazole



Drug Liaison Midwives - Contact details

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Drugs that prolong the QT interval

Amifampridine	Clarithromycin	Fluconazole	Ondansetron	Sotalol
Amiodarone	Clomipramine	Glasdegib	Osilodrostat	Sulpiride
Amisulpride	Crizotinib	Haloperidol	Osimertinib	Sunitinib
Anagrelide	Dasatinib	Hydroxychloroquine	Paliperidone	Tetrabenazine
Apalutamide	Delamanid	Hydroxyzine	Panobinostat	Tizanidine
Apomorphine	Desflurane	Inotuzumab ozogamicin	Pasireotide	Tolterodine
Aripiprazole	Disopyramide	Isoflurane	Pazopanib	Toremifene
Arsenic Trioxide	Dronedaron	Lapatinib	Pimozide	Vandetanib
Artemether	Droperidol	Lenvatinib	Quinine	Vardenafil
Artemimol	Efavirenz	Levomepromazine	Ranolazine	Vemurafenib
Bedaquiline	Encorafenib	Lithium	Ribociclib	Venlafaxine
Bosutinib	Entrectinib	Lofexidine	Risperidone	Vernakalant
Cabozantinib	Eribulin	Methadone	Selpercatinib	Voclosporin
Ceritinib	Erythromycin	Mobocertinib	Sevoflurane	Voriconazole
Chlorpromazine	Escitalopram	Moxifloxacin	Sildenafil	Zudopenthixol
Citalopram	Flecainide	Nilotinib	Sorafenib	

Further guidance can also be found on the Specialist Pharmacy Service website; 'Identifying risk factors for developing a long QT interval' is available [here](#), which contains safety concerns, risk factors, medicine risk factors, strategies for risk minimisation, and useful resources. Individual drug interactions can also be checked using the online BNF, [here](#).

The BNF 86 (September 2023 – March 2024) also lists the following drugs that are predicted by the manufacturer to increase the risk of QT prolongation, and therefore concurrent use alongside drugs that prolong the QT interval should be avoided:

Domperidone	Granisetron	Mefloquine	Ozanimod	Intravenous Pentamidine	Siponimod
Fingolimod	Ivabradine	Mizolastine	Palonosetron	Ponesimod	



Legal Requirements

- The principal legal requirements governing the supply of methadone and buprenorphine and the provision of related services are contained in the:
- The Misuse of Drugs (Supervision of Prescription and Supply of Methadone and Medicinal Products Containing Buprenorphine authorised for Opioid Substitution Treatment) Regulations 2017 [S.I. No. 522 of 2017], [S.I. No. 522/2017 - Misuse of Drugs \(Supervision of Prescription and Supply of Methadone and Medicinal Products containing Buprenorphine authorised for Opioid Substitution Treatment\) Regulations 2017 \(irishstatutebook.ie\)](#)
- Misuse of Drugs Regulations 2017 [S.I. No. 173 of 2017] [S.I. No. 173/2017 - Misuse of Drugs Regulations 2017. \(irishstatutebook.ie\)](#)
- Pharmacists must also comply with:
- The Pharmacy Act 2007 [Pharmacy Act 2007 \(irishstatutebook.ie\)](#)
- The Regulation of Retail Pharmacy Businesses Regulations 2008 (S.I. No. 488 of 2008) [S.I. No. 488/2008 - Regulation of Retail Pharmacy Businesses Regulations 2008 \(irishstatutebook.ie\)](#)
- Misuse of Drugs Regulations 2017 [S.I. No. 173 of 2017] [S.I. No. 173/2017 - Misuse of Drugs Regulations 2017. \(irishstatutebook.ie\)](#)



Links to further reading

- **Clinical Guidelines for Opioid Substitution Treatment 2016**

<https://www2.healthservice.hse.ie/organisation/national-pppgs/clinical-guidelines-for-opioid-substitution-treatment/>

- **Safe Prescribing and Dispensing of Drugs**

Joint Guidance - Medical Council and Pharmaceutical Society of Ireland

V2 March, 2024

https://www.thepsi.ie/sites/default/files/2024-07/Joint_Guidance_Final_0.pdf

- **Drug interaction resource**

<https://www.hiv-druginteractions.org/>

