

PSYCHOTROPIC DRUGS AND HIV

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Introduction: VIH/AIDS infection is frequently associated with psychiatric disorders. Psychiatric comorbidities may interfere in adherence to antiretroviral treatment. Therefore, diagnosis and treatment of these conditions are essential. However, the administration of a new drug to the HAART therapy can result in drug interactions.

Objectives: Our objectives were to describe the relationship between mental disorders and HIV and to analyze the interactions and adverse reactions when combining psychotropic drugs and antiretrovirals.

Aims: We aimed to review the literature of the association of mental disorders and HIV focusing mainly on the pharmacological aspects.

Methods: We reviewed the English literature from 1993 until 2011 searching MEDLINE using interchangeably the key-words *HIV, AIDS, psychosis, depression, anxiety, secondary mania, antidepressive agents, antipsychotics, benzodiazepines, and HAART.*

Results: Patients with mental illnesses may be more prone to acquire infectious diseases by taking risk behaviors. Also, HIV-infected patients are more likely to present with psychiatric symptoms than the general population. Adding pharmacotherapy may improve adhesion to the antiretroviral treatment. We highlight the use of antipsychotics, antidepressants, benzodiazepines and mood stabilizers in patients diagnosed with HIV. We include interactions between pharmacotherapy and antiretroviral-therapy. Some of these drugs (e.g. Ritonavir) have shown important interactions, while others have shown any or no information was found available.

Conclusions: Choosing the best therapeutic intervention in each case, particularly considering those drugs with the least interactions and adverse effects, is crucial for a therapeutic success and in the combat to infection.