

	A	B	C	D	E	F
1	drug	receptor and enzyme impacts	interaction	recommendation for management	Risk level 1-3, T	related studies
2	Atypical Antipsychotics	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6187748/table/T1/?report=objectonly	Most atypicals available in the US bind 5HT2A receptors and antagonize/partially antagonize and block or decrease binding and effects of psilocin/psilocybin. They also increase internalization of the 5HT2A receptor and may reduce signaling even when drug is no longer present. May or may not have an impact on therapeutic effects. (Discuss potential use of Abilify, ziprasidone etc to stop psychedelic experiences?)	Provider managed taper. 2 weeks minimum off the drug prior to psilocybin for efficacy? possible exception for microdosing.	1	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6187748/ doi:10.2174/1570159X15666170630163616 https://doi.org/10.2174/1570159X15666170630163616 Siafis S, Tzachanis D, Samara M, Papazisis G. Antipsychotic Drugs: From Receptor-binding Profiles to Metabolic Side Effects. <i>Curr Neuropharmacol</i> . 2018;16(8):1210-1223.
3	1st generation antipsychotics		Haloperidol has been found to increase the intensity of the experience of psilocybin			Johnson, M; Richards, W; Griffiths, R (August 2008). "Human hallucinogen research: guidelines for safety". <i>Journal of Psychopharmacology</i> . Thousand Oaks, California: SAGE Publications. 22(6): 603–20.
4	SSRI's: citalopram (Celexa, Cipramil) escitalopram (Lexapro) fluoxetine (Prozac) fluvoxamine (Luvox, Fevarin) paroxetine (Seroxat, Paxil) sertraline (Zoloft, Serlain)		Chronic antidepressant use may result in down-regulation of 5HT2A receptors and blunted psychedelic experiences. This does not seem to affect psilocybin for some. Some have concern for serotonin syndrome	Provider managed taper and (need data on how long to be off before therapeutic use	1	Bonson, K.R., J.W. Buckholtz, and D.L. Murphy, Chronic administration of serotonergic antidepressants attenuates the subjective effects of LSD in humans. <i>Neuropsychopharmacology</i> , 1996. 14(6): p. 425-36. Carhart-Harris, R.L. and D.J. Nutt, Serotonin and brain function: a tale of two receptors. <i>Journal of Psychopharmacology (Oxford, England)</i> , 2017. 31(9): p. 1091-1120.
5	SNRI's: venlafaxine (Effexor) duloxetine (Cymbalta) desvenlafaxine (Pristiq) atomoxetine (Strattera) levomilnacipran (Fetzima) milnacipran (Ixel, Savella, Impulsor) sibutramine (Meridia) tramadol (Ultram)		Chronic antidepressant use may result in down-regulation of 5HT2A receptors and blunted psychedelic experiences. This does not seem to affect psilocybin for some			Bonson, K.R., J.W. Buckholtz, and D.L. Murphy, Chronic administration of serotonergic antidepressants attenuates the subjective effects of LSD in humans. <i>Neuropsychopharmacology</i> , 1996. 14(6): p. 425-36. Carhart-Harris, R.L. and D.J. Nutt, Serotonin and brain function: a tale of two receptors. <i>Journal of Psychopharmacology (Oxford, England)</i> , 2017. 31(9): p. 1091-1120.
6	anti epileptics					
7	SNDI					
8	SDI					
9	SARI		Chronic antidepressant use may result in down-regulation of 5HT2A receptors and blunted psychedelic experiences. This does not seem to affect psilocybin for some			Bonson, K.R., J.W. Buckholtz, and D.L. Murphy, Chronic administration of serotonergic antidepressants attenuates the subjective effects of LSD in humans. <i>Neuropsychopharmacology</i> , 1996. 14(6): p. 425-36. Carhart-Harris, R.L. and D.J. Nutt, Serotonin and brain function: a tale of two receptors. <i>Journal of Psychopharmacology (Oxford, England)</i> , 2017. 31(9): p. 1091-1120.

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1	drug	receptor and enzyme impacts	interaction	recommendation for management	Risk level 1-3, T	related studies
10	Tricyclics: clomipramine (Anafranil) imipramine (Tofranil, Janimine, Praminil) trimipramine (Surmontil) amitriptyline Maprotiline (Ludiomil) Nortriptyline (Pamelor, Aventyl, Norpress)		subjective reports of increased intensity of the experience in LSD users			Bonson, K.R. and D.L. Murphy, Alterations in responses to LSD in humans associated with chronic administration of tricyclic antidepressants, monoamine oxidase inhibitors or lithium. Behav Brain Res, 1996. 73(1-2): p. 229-33.
11	SERM					
12	Benzodiazepines					
13	Anticholinergics					
14	mood stabilizers					
15	Triptans	Triptans all bind with high affinity to the 5- HT1B, 5-HT1D, and 5-HT1F	There is competition for receptors	Not for use within 24 hours of psilocybin		Ai-Ming Yu. Triptans: Indolealkylamines: Biotransformations and Potential Drug-Drug Interactions AAPS J. 2008 Jun; 10(2): 242 https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2751378/
16	Tramadol					
17	MAOI-As: Hydrazine (antidepressant) Isocarboxazid (Marplan) Nialamide (Niamid) Phenelzine (Nardil, Nardelzine) Hydracarbazine Tranylcypromine (Parnate, Jatrosom) Bifemelane (Alnert, Celeport) Moclobemide (Aurorix, Manerix) Pirlindole (Pirazidol) Toloxatone (Humoryl) Rasagiline (Azilect) Safinamide (Xadago)		prolonged binding due to inhibition of breakdown of psilocin			
18	MAOI-B Selegiline (Deprenyl, Eldepryl, Emsam, Zelapar)					
19	cyp interactions and inhibition/agonism		may change pharmacodynamics of daily medications if taken regularly	this is more related to regular use such as microdosing		

OPAB DRAFT PARTIAL Psilocybin_Drug interactions

	A	B	C	D	E	F
1	drug	receptor and enzyme impacts	interaction	recommendation for management	Risk level 1-3, T	related studies
20	Antibiotics azithromycin clarithromycin erythromycin roxithromycin metronidazole (with alcohol) moxifloxan Antifungals fluconazole (in cirrhosis) ketoconazole Antivirals nelfinavir Antimalarials chloroquine mefloquine Anaesthetics halothane Antiarrhythmics disopyramide procainamide quinidine amiodarone sotalol Antidepressants amitriptyline clomipramine imipramine dothiepin doxepin Antipsychotics risperidone fluphenazine haloperidol clozapine thioridazine ziprasidone pimozide droperidol Antihistamines terfenadine* astemizole* Other probucol cisapride	drugs that prolong QTc interval	psilocybin can prolong QT interval and theoretically could act synergistically with other substances			
21	Disulfiram	ALDH irreversible inhibitor	ALDH is one of the minor metabolic pathways for psilosin	Not for use within 1 week? (allowing time for enzyme regeneration)		
22	lapatinib, pazopanib, regorafenib and sorafenib	Inhibits UDP-glucuronosyltransferase enzymes	UDP-glucuronosyltransferase enzymes are the major pathway for metabolism and excretion of psilocin			Miners JO, Chau N, Rowland A, Burns K, McKinnon RA, Mackenzie PI, Tucker GT, Knights KM, Kichenadasse G. Inhibition of human UDP-glucuronosyltransferase enzymes by lapatinib, pazopanib, regorafenib and sorafenib: Implications for hyperbilirubinemia. Biochem Pharmacol. 2017 Apr 1;129:85-95. doi: 10.1016/j.bcp.2017.01.002. Epub 2017 Jan 6. PMID: 28065859. https://pubmed.ncbi.nlm.nih.gov/28065859/
23	Bupropion (Wellbutrin / Zyban)					
24	Vortioxetine (Trintellix)					
25						
26						
27						
28	Psilocybin	SERT 3,801.0 Human	1A, UGT1A10 exhibited the highest			psilocin and 4-hydroxyindole by the human UDP-
29						