



Regina Qu'Appelle
HEALTH REGION
HIV Post-Exposure Prophylaxis "PEP Kit"
Patient Information

What is the risk of HIV infection after an exposure?

Most exposures do not result in infection. The risk of infection varies with the type of exposure, the amount of blood involved and the amount of virus in the blood at the time. The average risk of HIV transmission after needle sticks or cuts is estimated to be 0.3% (or 1 in 300 episodes).

Stated another way, 99.7% of needle stick/cut exposures involving HIV-infected blood do NOT lead to infection. The risk from mucocutaneous exposure (e.g. eye, nose or mouth) to HIV-infected blood is approximately 0.1% or (1 in 1000 episodes).

Why should HIV post-exposure prophylaxis (PEP) be considered?

Early animal studies with HIV-related viruses suggest the use of anti-HIV medications can reduce the risk of infection following exposure to the virus. A study in adult healthcare workers following exposure to HIV-infected blood suggests early short-term AZT use is associated with a marked decreased risk of acquiring HIV. The availability of new medications, new studies and the increase in AZT-resistant HIV viruses, now indicates a combination of medications may be more effective than AZT alone.

What medications are recommended for PEP? (Adult Doses)

- ◆ **Combivir® tablets** (contain 2 medications: 3TC 150mg + AZT 300mg per tablet): **Take 1 tablet every 12 hours, plus**
- ◆ **Kaletra® tablets** (contain 2 medications: Lopinavir 200mg + Ritonavir 50mg per tablet): **Take 2 tablets (=400mg/100mg) every 12 hours**

These are called antiretrovirals and work by stopping the HIV virus from multiplying. They are commonly used in the *treatment* of individuals with AIDS and HIV infection. For RQHR employees, these are available with a prescription filled at RQHR Department of Pharmacy Practice. If the exposure is work-related, be sure the Workmen's Compensation Board (WCB) is notified as soon as possible. Non-employees generally obtain the remainder of medication with a prescription filled at a community pharmacy. Be sure to discuss with the ID Clinic nurse or pharmacist how to obtain these medications if you are to complete the 28-day course.

How should these medications be taken?

Treatment should be started promptly, preferably within 1 - 2 hours after the exposure; there is likely no benefit if initiated more than 72 hours after the incident. **The recommended total course of the prophylactic regimen is 4 weeks (28 days)**, however, if the result of the source patient's blood is negative for HIV, the medications may be stopped. In some cases, only 2 of the 3 medications may be used [e.g. 3TC & AZT (Combivir®)].

NOTE: The kits only provide the initial 3 days of medication. *Be sure you have enough medication until your next visit with the doctor, or you have been told you may discontinue the medications.*

Take each dose as close to the scheduled times as possible in order to maintain effective levels of medication in your body. Do not skip any doses.

Kaletra® should be taken with food to minimize side effects.
Combivir® may be taken with or without food.

What should you do if you forget a dose?

If you miss a dose, take it as soon as you remember, then carry on with your regular dosing schedule. If you remember your missed dose and it is less than 4 hours before your next dose, do not double the dose. Continue with your regular dosing schedule.

Any PRINTED version of this document is only accurate up to the date this document was developed. RQHR can not guarantee the currency or accuracy of any printed policy. RQHR accepts no responsibility for use of this material by any person or organization not associated with RQHR. No part of this document may be reproduced in any form for publication without permission of RQHR.

What side effects can occur with these medications?

Some people may experience allergic reactions. **If you have any of the following symptoms soon after taking a dose, STOP taking the medication & call your doctor immediately or go to the Emergency Department in the hospital:**

- sudden wheeziness, chest pain or tightening
- swelling of eyelids, face or lips
- skin rash or “hives” anywhere on the body

Most side effects are mild & reversible, however, if the following occurs, or they are severe or prolonged, inform your doctor:

- **Combivir®:** nausea, vomiting, stomach cramps, headache, insomnia, muscle weakness
- **Kaletra®:** diarrhea, feeling weak or tired, headache, nausea, vomiting, rash

This is not a complete list of side effects. If you have *any* unexpected effects while taking this medication, contact your doctor.

Management of Side Effects:

- For nausea & vomiting, try dimenhydrinate (Gravol®) as per package directions. Drink lots of fluid.
- For diarrhea, try loperamide (Imodium®) as per package directions. Drink lots of fluid.
- For headaches, try acetaminophen (Tylenol®), ibuprofen (Motrin®, Advil®) or ASA (Aspirin®) as per package directions. Rest in a quiet dark room with a cool cloth on your forehead.

If therapy is to continue for the complete 28 days, other side effects *may* occur, however, they generally arise after a longer time. Rarely, AZT or 3TC alone or together cause a decrease in certain types of blood counts. [i.e. reduced red blood cells can make you feel tired or short of breath), or leukopenia (decreased white blood cells that put you at a higher risk of bacterial infection)]. **Inform your physician if you notice any symptoms of fever, chills, shortness of breath, palpitations, or fatigue.** 3TC can also decrease platelets which can increase your risk of bleeding or bruising as platelets are needed to help blood clot. Blood tests will be done regularly to check for any changes in these values. If there are problems, the dose of your medications may need to be adjusted or the medication(s) changed or stopped.

Before beginning treatment, make sure your doctor knows:

- If you had or have, a problem with your kidneys or liver, particularly hepatitis B or C
- If you have any other illnesses
- If you are pregnant, plan on becoming pregnant, or are breast-feeding (NOTE: There is no evidence of birth defects during short term safety studies, but breast-feeding is not recommended.)
- All your medicines, including vitamin supplements, herbal remedies or homeopathic remedies, including those you bought yourself. Be sure to ask your pharmacist or doctor before starting anything while on these medications. **Kaletra® may reduce the effectiveness of birth control pills.** Alternate or additional contraceptive measures should be used. **Do not take Kaletra with: St. John's Wort**, a herbal product -- it may decrease Kaletra levels and make it less effective, nor with the cholesterol-lowering medicines Mevacor (lovastatin) or Zocor (simvastatin) because of possible serious reactions. There is also a risk between Kaletra and Lipitor (atorvastatin).

What other precautions should you follow while on these medications?

Advise sexual partners of potential risk and practice safer sex; avoid blood donations; do not share razors, toothbrushes or needles; avoid pregnancy; stop breastfeeding.

How should these medications be stored?

Store in tightly closed containers in a cool (15-25°C), dry place, protected from light. Do not store in your bathroom or kitchen as heat & moisture may cause the medications to lose potency. Keep out of sight & reach from children. (NOTE: Kaletra® *soft gel capsules & liquid* may also be kept at room temperature, but only for 42 days/6 weeks.)

If you have any questions/concerns about these medications, please discuss them with your pharmacist, doctor or nurse.

Any PRINTED version of this document is only accurate up to the date this document was developed. RQHR can not guarantee the currency or accuracy of any printed policy. RQHR accepts no responsibility for use of this material by any person or organization not associated with RQHR. No part of this document may be reproduced in any form for publication without permission of RQHR.