

Guidelines for the Management of Exposures to Blood and Body Fluids

Appendix 6b – Patient Medication Information for HIV Post-Exposure Prophylaxis

Page 1 of 4

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Please see the following pages for Patient Medication Information for HIV Post-Exposure Prophylaxis (HIV PEP).

Patient Medication Information for HIV Post-Exposure Prophylaxis (Infection Prevention)

What is the risk of HIV infection after an exposure to HIV-infected blood?

- **Most exposures do not result in infection.** The risk of HIV infection increases with the amount of blood and the number of viral particles present. In cases where the source is HIV positive but has an undetectable viral load the risk of an HIV infection is almost zero. In cases where the source is HIV negative, no risk of infection exists.
- The average risk of getting HIV after exposure to known HIV-infected blood through cut is about one out of 300 exposures.
- The risk from an exposure to known HIV-infected blood to the eye or mouth is much less – about one out of 1,000 exposures.

Why post-exposure prophylaxis (PEP) should be considered:

- Post-exposure prophylaxis refers to preventing HIV infection. A study in healthcare workers following exposure to HIV-infected blood suggested early short term zidovudine (an antiretroviral medication) was associated with a significantly decreased risk of getting HIV. Combinations of antiretrovirals are likely even more effective and are the standard for post-exposure prophylaxis.

What medications are recommended for post-exposure prophylaxis?

- Truvada® and Isentress® are antiretroviral medications used in the *treatment* of individuals with HIV and are also recommended for prophylaxis. They work by slowing the rate of HIV reproduction in the body.

Adults/Children 35kg or over:

- Isentress® ONE tablet every 12 hours (400mg raltegravir)) **plus**
- Truvada® ONE tablet every 24 hours (300mg tenofovir disorpoxil fumarate + 200mg emtricitabine per tablet)

Less than 35kg:

- As directed by your health care provider.

How these medications should be taken:

Medication should be started as soon as possible after exposure, preferably within 1-2 hours. There is no benefit to starting medications after 72 hours after exposure.

- If the source person involved in the exposure is found to be HIV negative, these medications should be stopped.
- The medications in the kit are provided at no charge.
- If you are to complete the recommended 4 weeks (28 days) course, your doctor will provide you with a prescription to take to your pharmacy.
- The Workers' Compensation Board (WCB) covers the medication cost if the exposure is work-related, so the appropriate paperwork must be initiated ASAP.
- To ensure effectiveness, avoid missing doses. Take each dose as close to the scheduled time as possible to maintain the levels in your body. Do not skip doses. Consider setting an alarm as a reminder and place the medications in a dosette.
- Take with a meal or light snack to minimize side effects.

IMPORTANT NOTICE

- It may take up to 2 days for a community pharmacy to obtain these medications, so take your prescription to the pharmacy as soon as possible. If possible, find a pharmacy that has these medications in stock.

What you should do if you forget a dose:

- Take it as soon as you remember. If it is less than 6 hours to your next dose of Isentress or less than 12 hours to your next dose of Truvada, skip the missed dose and resume regular dosing schedule.

What the side effects of Truvada® and Isentress® are:

- Some people experience allergic reactions to medications. **If you have any of the following symptoms soon after taking a dose, STOP taking the medication and tell your doctor, or go to an Emergency Department immediately.**
 - sudden wheeziness, chest pain or tightening;
 - swelling of eyelids, face or lips;
 - fever, chills, shortness of breath, heart palpitations;
 - “hives” or severe rash.
- **Truvada®** – Common side effects are generally mild and temporary and may include headache, nausea, loss of appetite, diarrhea.
- **Isentress®** – Isentress is well tolerated but may cause insomnia, headache, dizziness or abnormal dreams.

If any side effect is concerning or lasts more than 7 days, please call your pharmacist or doctor.

What other precautions you should follow while using antiretrovirals:

- Advise sexual partners of potential risk. Use barrier protection (e.g. condoms) for sexual intercourse.
- Avoid pregnancy.
- HIV is transmitted in breastmilk. If you are breastfeeding, discuss with your doctor how to reduce risk – consider stopping or pumping to maintain supply once infection has been ruled out.
- Do not donate blood.
- Do not share razors, toothbrushes or needles.
- Doses of medications may need to be adjusted depending on your health history.
Tell your doctor if you:
 - had or have a problem with your kidneys;
 - had or have any liver disease, particularly hepatitis;
 - have any other medical conditions or illnesses;
 - are pregnant, plan on becoming pregnant or are breast-feeding;
 - are taking **ANY** other medication (prescription, non-prescription, herbals, etc.).

Ensure your pharmacist and/or doctor confirms the medications you take do not impair the benefit of these medications (i.e. interact), or lead to unwanted or severe side effects.
Do not start other medications without first discussing them with your doctor or pharmacist.

How these medications should be stored:

- Store in tightly closed containers in a cool (15-30°C), dry place protected from light.
- Avoid storage in high heat and/or humidity as this may decrease the effectiveness of the medications.
- Keep out of reach of children.

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

(Adapted from Vancouver Coastal)