GUIDELINES FOR POST-EXPOSURE PROPHYLAXIS (PEP) AFTER NON-OCCUPATIONAL EXPOSURE TO HIV

In all cases, contact the Paediatric Infectious Diseases Consultant on call via switchboard (9345 5522) for advice on the need for PEP and to discuss follow-up.

Please affix patient label here

Please print this form, circle exposure and drug choice and fax to 93455034

1. Has there been significant exposure to recommend PEP?

PEP is recommended (3 drugs) when:

- Source is *known* to be HIV-positive with vaginal/anal intercourse or shared injecting equipment
- Source HIV status is *unknown* with anal intercourse or shared injecting equipment and source from sub-Saharan Africa or a man who has sex with men

PEP should be considered (2 drugs) when:

- Source is *known* to be HIV-positive where exposure is oral intercourse with ejaculation OR blood exposure where the mucosa is NOT INTACT
- Source HIV status is unknown and vaginal intercourse and source from sub-Saharan Africa

PEP is not recommended when:

- Source is *known* to be HIV-positive where exposure is oral intercourse with ejaculation where the mucosa is INTACT or exposure of INTACT skin to body fluids
- Source HIV status is *unknown* and vaginal/oral intercourse and source not from sub-Saharan Africa
- Community-acquired needlestick injury

For full explanation of risk factor analysis, see: http://www.ashm.org.au/images/publications/guidelines/2007nationalnpepguidelines2.pdf

2. Laboratory tests and follow-up

Test	Baseline*	6 wks**	3 mths**	6 mths**
HIV	\checkmark	\checkmark	\checkmark	\checkmark
Hep B***	\checkmark			\checkmark
Hep C	\checkmark		\checkmark	\checkmark
STI	\checkmark			

* Baseline bloods should also be taken from source if known. If source is known to be HIV positive, bloods should also be taken for HIV viral load and resistance testing.

** Follow up bloods to be taken at RCH ID clinic.

*** Hepatitis B vaccine (+/- immunoglobulin (if within 72 hours)) should be administered within 14 days if no protective level of anti-HBs antibodies are shown on serological testing.

Routine testing for other sexually transmitted infections (eg urine PCR for Chlamydia and Gonorroea)

Drafted by Tom Connell, Penelope Bryant and Louise Bordun Jan 2010 Guideline adapted from the Australian Society of HIV medicine, Children's HIV Association (CHIVA) and the Paediatric European Network for Trials in AIDS

3. PEP medications

PEP should be started as early as possible, preferably within **1 hour** but has been shown to be effective **up to 72** hours following exposure if required. Duration of PEP is **28 days**

* < 40 kg

For 2-drug regimen use Zidovudine and Lamivudine For 3-drug regimen use Zidovudine, Lamivudine and Kaletra

** > 40 kg

For 2-drug regimen use Combivir or Truvada (improved tolerability with Truvada) For 3-drug regimen use [Combivir plus Kaletra] or [Truvada plus Kaletra]

Medication	Formulary	Dose
Weight < 40 kg*		
Zidovudine (AZT)	Cap: 100 mg or 250 mg Liquid: 10 mg/ml	180 mg/m²/dose BD (Max: 250 mg BD)
Lamivudine (3TC)	Tab: 100 mg or 150 mg Liquid: 10 mg/ml	4 mg/kg/dose BD (Max: 150 mg BD)
Kaletra (LPV/rtv)‡	Tab: Paed Lopinavir 100 mg + Ritonavir 25 mg Liquid: Lopinivir 80 mg/ml + Ritonavir 20 mg/ml	See below for dose by surface area BD
Weight > 40 kg**		
Combivir (AZT+3TC)	Tab: AZT 300 mg + 3TC 150 mg	ONE tab BD
Truvada (TDF+FTC)	Tab: Tenofovir disoproxil fumarate 300 mg + Emtricitabine 200 mg	ONE tab once daily
Kaletra (LPV/rtv)	Tab: Adult Lopinavir 200 mg + Ritonavir 50 mg	TWO tabs BD

 \pm Kaletra dose based on surface area: $\sqrt{}$

 $\sqrt{\frac{\text{Weight (kg) x Height (cm)}}{3600}}$

4. How do I access medications?

Normal pharmacy hours (Mon-Fri: 0830-1730, Sat: 0900-1300, Sun: 1000-1200) Contact the RCH Pharmacy Department on 9345 5491

Outside of these hours:

Child <40kg: Contact the on-call pharmacist via switchboard (Ph: 9345 5522) Child >40kg: Contact the after hours nurse co-ordinator (Ph: 9345 5522) to obtain medications from the after hours drug cupboard in Emergency.

5. How do I organise follow up?

Refer to RCH ID for the following Monday PM clinic, by faxing this form to 93455034

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