

Post-Exposure Prophylaxis (PEP) for HIV

Information and advice for patients

Occupational Health & Wellbeing

Please read this information carefully before starting treatment. If you have any queries or concerns about any of the information in this leaflet you should ask your doctor about them.

What is post-exposure prophylaxis (PEP)?

Post-exposure prophylaxis (PEP) is a treatment to reduce your chances of contracting human immunodeficiency virus (HIV) after potentially being exposed to it. It involves taking the following tablets by mouth, as prescribed:

- Emtricitabine/Tenofovir disoproxil containing 200mg of emtricitabine and 245mg of tenofovir disoproxil.
- Raltegravir (Isentress) pink 400mg tablets.

These are both anti HIV medicines

What is the benefit of taking PEP?

The benefit of taking PEP is that it can greatly reduce your risk of contracting HIV if it is taken soon after exposure to the virus. Although these tablets are not licensed specifically for stopping HIV, they are licensed to treat HIV.

What are the risks of PEP?

These medicines can cause the following common side-effects:

- Headaches
- Dry mouth
- Nausea
- Vomiting
- Diarrhoea
- Rash
- Tiredness
- Dizziness
- Tingling sensation
- Loss of appetite
- Stomach ache
- Sleeplessness
- Cough
- Flu-like symptoms
- General pain
- Skin reactions

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Less common, significant side-effects can occur after 4-6 weeks of treatment. Further details about these and other possible side effects can be found in the manufacturer's leaflet which comes with the medication.

There is not sufficient evidence about the effect of these medications during pregnancy so pregnant women may still be advised to take them if the benefits are greater than the possible risks. Women who are still breastfeeding should stop breastfeeding whilst taking these medications or if found to be HIV positive.

What are the risks of not taking PEP?

If you have had exposure to HIV, there is a small risk that you may have contracted the virus: taking PEP reduces this risk. So if you do not take PEP, this risk is not reduced.

Are there any alternatives to PEP?

There is no alternative treatment to prevent HIV but if you are finding it difficult to cope with the side-effects of the medication, a HIV specialist may be able to adjust it.

Getting your medication for the first time

Before you are given PEP, you will have an assessment to see whether you are at risk of getting HIV. If it is appropriate for you to have PEP, please tell the doctor if you:

- Are taking any other medicines or vitamins
- Have a history of liver disease, kidney disease, blood disorders (such as anaemia), allergies and if you have ever had a reaction to any medicines
- Are pregnant or breastfeeding

Before you start treatment, the doctor may ask to take a sample of your blood. You will then need to have further blood tests at regular intervals to monitor your blood and liver function. Your doctor will advise you how often and for how long you need these blood tests.

You will be given 30 days' supply of PEP by Occupational Health & Wellbeing, the Emergency department (ED) or the sexual health department (GUM).

How to take the medication

Please read the manufacturer's leaflet that comes with the medication before taking it for the first time. You should start this medication as soon as possible after exposure and take it for the next 4 weeks. Make sure you take the dose that has been prescribed.

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The first dose of Emtricitabine/Tenofovir disoproxil tablets (1 tablet) and Raltegravir (1 tablet) should be taken immediately. After the first dose continue to take medications as stated below:

- **Emtricitabine/Tenofovir disoproxil tablets** – One tablet to be taken once each day (every 24 hrs).
- **Raltegravir** – One tablet to be taken twice a day (every 12 hrs).

If you miss a dose take 1 tablet as soon as possible. If a dose is missed and it is nearly time for your next dose, take just one tablet. Do not take a double dose.

Precautions

If there is a chance that you have HIV, even if you are taking PEP, it is important you reduce the risk of infecting others:

- To reduce the risk of exposing others to HIV during sexual intercourse please ensure you have safe sex by using a condom.
- Women who are breastfeeding should stop breastfeeding while taking these medicines or if found to be HIV positive

Storing the medication

- Keep these medications out of the sight and reach of children.
- Store at room temperature.
- Do not use after the expiry date.
- Store them in the original packaging.
- Keep packaging tightly closed.
- Ask your pharmacist how to dispose of any medications.

Follow-up

You will be told what follow-up blood tests and appointments you need whilst taking this medication. If you experience any unpleasant side effects from the medication please contact the department that provided you with the medication or your GP so the treatment can be re-assessed.

Contact details

If you have any questions or concerns please contact the department that provided you with this medication by contacting the hospital switchboard and asking for them, or alternatively speak to your GP or local pharmacist.

Hospital switchboard: 0121 554 3801

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Further information

For information on HIV visit the Terence Higgins Trust website: www.tht.org.uk

For more information about our hospitals and services please see our website www.swbh.nhs.uk, follow us on Twitter @SWBHnhs and like us on Facebook www.facebook.com/SWBHnhs.

Sources used for the information in this leaflet

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- British National Formulary (2022) *HIV infection*. Available at: <https://bnf.nice.org.uk/treatment-summary/hiv-infection.html> (Accessed 31 March 2022).
- British association for sexual health and HIV (2021) *UK guideline for the use of HIV post-exposure prophylaxis 2021*. Available at: <https://www.bashhguidelines.org/media/1303/pep-2021-manuscript-post-consultation-publication-version-dec-2021.pdf> (Accessed 31 March 2022).
- National institute for health and care excellence (2016) *Pre-exposure prophylaxis of HIV in adults at high risk: Truvada (emtricitabine/tenofovir disoproxil)*. Available at: <https://www.nice.org.uk/advice/esnm78/chapter/Full-evidence-summary> (Accessed 31 March 2022).

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