

Medications you have been recommended for post-exposure prophylaxis

Your doctor has recommended post exposure prophylaxis medications to reduce the risk of acquiring Human Immunodeficiency Virus (HIV). Post exposure prophylaxis should be commenced as soon as possible after the exposure and will continue for a total of 28 days.

Potential medications prescribed or administered include:

Age	Recommended 3-drug regimen
Adolescents aged 13 years and above	Tenofovir disoproxil maleate with
	Emtricitabine PLUS Raltegravir
Children 4 weeks to 12 years	Zidovudine PLUS Lamivudine PLUS
·	Raltegravir

Medication	Problems the medications may cause (also known as side effects)	Special information about taking the medication
Zidovudine (AZT)	Common: Tiredness, weakness, diarrhoea, flatulence, abdominal pain, dizziness. Rare: Taste disturbance, back pain, anxiety, confusion, photophobia, skin and/or nail pigmentation. Your doctor will ask about these when you have an appointment. Contact your Doctor if you feel extremely tired, weak, or have	Can be taken with or without food. Available as a liquid or capsule
Lamivudine (3TC)	diarrhoea. Common: Diarrhoea, abdominal pain, rash, tiredness. Rare: Pancreatitis. Contact your Doctor if you have severe nausea, vomiting, stomach pain, fatigue or weakness.	Can be taken with or without food. Tablets can be crushed and mixed with soft food (e.g. yoghurt) or water. Available as a liquid or capsule
Raltegravir	Common: Diarrhoea, flatulence, abdominal pain, nausea, vomiting, abnormal dreams,	Both tablets and the chewable tablets can be cut or crushed. Can be taken with or without food. Avoid antacids and multivitamins



	insomnia, weakness, depression, dizziness, hyperactivity, rash. Rare: Depression, sore muscles. Contact your Doctor if you develop a severe rash, or experience significant muscle pain (especially in the back of the legs)	(including calcium, magnesium, iron, aluminium and/or zinc) 4 hours before and after the dose. Available as 25mg chewable tablets, 100mg chewable tablets and 400mg tablets
Tenofovir disoproxil maleate with Emtricitabine	Common: Nausea, vomiting, diarrhoea, flatulence, abdominal pain, weakness, headache, fever, dizziness. Rare: Kidney failure, rash, itch, hepatitis, pancreatitis.	Take with food. Tablets can be cut or dispersed in water or juice, but has a bitter taste. If dispersing in water use at least 20mL of water, the solution will disperse in approximately 7 minutes if gently shaken. The tablet may be crushed and mixed with soft food such as apple puree or yoghurt.
Combivir® (Zidovudine with lamivudine)	See table above for individual agents.	Can be taken with or without food. The tablet may be cut or crushed and mixed with water or a soft food such as apple puree or yoghurt.

Ongoing monitoring/tests required:

Blood tests will be required three times over the next three months to check for HIV infection – now, in 6 weeks and in 3 months from now. These can be done at PCH or at a local collection centre for convenience.

Ongoing appointments:

Ongoing support will be offered by your treating team and the infectious diseases team. Appointments will be required at 1-2 weeks, 6 weeks and 3 months after the initial presentation.

If you have any questions or if your child refuses/spits out/is unable to take the medication, or if suspected side-effects occur please contact PCH switchboard on 6456 2222 and ask to be put through to the Infectious Diseases Specialist.

This document can be made available in alternative formats on request for a person with a disability.

Child and Adolescent Health Service

15 Hospital Avenue, Nedlands, WA, 6009

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Government of Western Australia Child and Adolescent Health Service

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