



Adult Antiretrovirals for HIV Post-Exposure Prophylaxis (HIV PEP Kits)

Any exposure to blood and body fluids requires an assessment of the risk of infection with HIV, Hepatitis B and Hepatitis C. See the ***Protocol for the Management of Exposures to Blood and Body Fluids***, Section 5.2 in the Nunavut Communicable Disease and Surveillance Manual ([Manual](#)) for guidance.

Assessing the risk of HIV should be done in conjunction with experts. Health Care Providers in Nunavut can call the HIV Accidental Exposure Program at the BC Centre for Excellence in HIV/AIDS on a 24/7 basis. The Centre will provide assistance in making urgent decisions regarding risk of infection with HIV and the need for post-exposure prophylaxis with the drugs included in this kit.

BC Centre for Excellence in HIV/AIDS
1-604-806-8429

Availability of Antiretroviral Drugs

- Kits with a 1-month supply of antiretrovirals are kept in the health centres and hospitals in Nunavut.
Note: The bottles contain a 30-day supply of medications, however, the treatment course is only 28 days. The full bottles may be given to the patient with counselling that the extra pills may be used if a pill is dropped or wasted.
- Additional replenishment stock is available from the Regional Pharmacies upon request.

The kits contain the following medications:

DRUG	DIRECTIONS
Tenofovir DF/emtricitabine 300/200 mg tablets (Truvada®)	Take 1 tablet (300 mg/200 mg) once daily with or without food for 28 days
Raltegravir 400 mg tablets (Isentress®)	Take 1 tablet (400 mg) twice daily with or without food for 28 days

A patient information sheet is also available and should be reviewed with the patient.

Notes:

- Please do not open the bottles unless needed. These medications are very expensive.
- If the bottles are unopened, they can be returned for credit when they expire.

Special Populations

1) Pregnancy and Breastfeeding

The Canadian Guidelines on HIV PEP recommend that patients who are pregnant and require PEP should receive tenofovir DF/emtricitabine (Truvada®) 1 tablet orally daily with raltegravir 400 mg orally twice daily. Breastfeeding during PEP use is not advised.

2) Renal Impairment

Recommended Dose Adjustments for Adults:

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Truvada (tenofovir DF/emtricitabine):

CrCl 50 mL/minute or greater: No dosage adjustment necessary

CrCl 30 to 49 mL/minute: 1 tablet every 48 hours

CrCl less than 30 mL/min: Do not administer

Raltegravir:

Mild, moderate, and severe impairment: No dosage adjustment necessary.

3) Pediatrics

To be discussed with a specialist. Alternative antiretrovirals for pediatric patients are available in the Regional Pharmacies.

Drug Interactions

Tenofovir DF/emtricitabine and raltegravir have fewer drug interactions than other antiretrovirals, however, it is still important to check for any potential interactions with the patient's current medications. Sources to consult include Lexicomp and the HIV/HCV Drug Therapy Guide which is available online at hivclinic.ca.

The pharmacist at the Qikiqtani General Hospital may also be consulted at 867-975-8600 ext 6302.

A few interactions of note:

1. Tenofovir DF/emtricitabine (Truvada®)

- Tenofovir + NSAIDs (e.g., celecoxib, diclofenac, ibuprofen, indomethacin, ketorolac, meloxicam, naproxen) = Enhanced nephrotoxic effect, particularly high-dose long-term use of NSAIDs. Low-dose, short-term use of NSAIDs is usually possible.

2. Raltegravir (Isentress®)

- Antacids with magnesium or aluminum (e.g., Maalox®, Gaviscon®) should not be used during treatment with raltegravir.
- Iron supplements should be taken at least 3 hours before or 3 hours after raltegravir.
- Tuberculosis Medications (consult with TB team if patient on active or latent TB treatment):
 - Rifampin may decrease the serum concentration of raltegravir. The manufacturer recommends doubling the dose of raltegravir to 800 mg BID if co-administered with rifampin.
 - Rifapentine given once weekly does not require a dose adjustment of raltegravir.

References:

1. British Columbia Centre for Excellence in HIV/AIDS. HIV Post-Exposure Prophylaxis (PEP) Guidelines. Updated March 2020 [BC-CfE HIV PEP Guidelines](#).
2. HIV/HCV Drug Therapy Guide, available at: [HIV/HCV Drug Therapy Guide](#).
3. Tan DHS et al. Canadian guideline on HIV pre-exposure prophylaxis and nonoccupational postexposure prophylaxis. *CMAJ* 2017 November 27;189: E1448-58.