

Nevirapine (NVP) (Viramune®)	Oral: usually as part of combination therapy 2 mg/kg once a day for 1 week, then 4 mg/kg once a day for 1 week – round doses <u>up</u> to the nearest 0.5 mg to assist administration <i>If mother has already received >3 days of nevirapine:</i> 4 mg/kg once a day – (round doses <u>up</u> to the nearest 0.5 mg)	Rash and liver dysfunction – rare in neonates Stop NVP after 2/52, in view of long half-life , continue other PEP agents for full 4/52																											
INSTI: integrase strand transfer inhibitor																													
Raltegravir (RAL) (Isentress®) 100 mg sachets for oral suspension (10 mg/mL)	Oral: usually as part of combination therapy 1.5 mg/kg once a day from birth to day 7, then 3 mg/kg twice a day until 4 weeks of age. See dose banding: <table><tr><th>Body weight (kg)</th><th>Dose</th></tr><tr><td colspan="2">In full-term neonates >37 weeks</td></tr><tr><td colspan="2">Birth to 1 week – once a day dosing</td></tr><tr><td>2 to <3 kg</td><td>4 mg once a day</td></tr><tr><td>3 to <4 kg</td><td>5 mg once a day</td></tr><tr><td>4 to <5 kg</td><td>7 mg once a day</td></tr><tr><td colspan="2">1 to 4 weeks – twice a day dosing</td></tr><tr><td>2 to <3 kg</td><td>8 mg twice a day</td></tr><tr><td>3 to <4 kg</td><td>10 mg twice a day</td></tr><tr><td>4 to <5 kg</td><td>15 mg twice a day</td></tr></table>	Body weight (kg)	Dose	In full-term neonates >37 weeks		Birth to 1 week – once a day dosing		2 to <3 kg	4 mg once a day	3 to <4 kg	5 mg once a day	4 to <5 kg	7 mg once a day	1 to 4 weeks – twice a day dosing		2 to <3 kg	8 mg twice a day	3 to <4 kg	10 mg twice a day	4 to <5 kg	15 mg twice a day	Rash and liver dysfunction: monitor liver function tests at 5–7 days of age							
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PI - protease inhibitor																													
Lopinavir/ritonavir (Kaletra®) Liquid: 5 mL = (Lopinavir 400 mg + ritonavir 100 mg)	Oral: usually as part of combination therapy 300 mg/m ² (of lopinavir) twice a day – use dose banding table below <table><tr><th>Weight range (kg)</th><th>SA range (m²)</th><th>Kaletra volume to be given orally TWICE A DAY</th></tr><tr><td>1–1.5</td><td>0.1–0.13</td><td>0.5 mL</td></tr><tr><td>1.51–2</td><td>0.14–0.16</td><td>0.6 mL</td></tr><tr><td>2.01–2.5</td><td>0.17–0.19</td><td>0.75 mL</td></tr><tr><td>2.51–3</td><td>0.20–0.21</td><td>0.8 mL</td></tr><tr><td>3.01–3.5</td><td>0.22–0.24</td><td>0.9 mL</td></tr><tr><td>3.51–4</td><td>0.25–0.26</td><td>1 mL</td></tr><tr><td>4.01–4.5</td><td>0.27–0.28</td><td>1.1 mL</td></tr><tr><td>4.51–5</td><td>0.29–0.30</td><td>1.2 mL</td></tr></table>	Weight range (kg)	SA range (m ²)	Kaletra volume to be given orally TWICE A DAY	1–1.5	0.1–0.13	0.5 mL	1.51–2	0.14–0.16	0.6 mL	2.01–2.5	0.17–0.19	0.75 mL	2.51–3	0.20–0.21	0.8 mL	3.01–3.5	0.22–0.24	0.9 mL	3.51–4	0.25–0.26	1 mL	4.01–4.5	0.27–0.28	1.1 mL	4.51–5	0.29–0.30	1.2 mL	Severe adrenal dysfunction, electrolyte imbalance and cardiogenic shock in neonates, especially premature infants Avoid in premature infants, only use, as per birth plan, when benefit of giving outweighs the potential risks Monitor for signs of toxicity, check U+E, pH, glucose, lactate, LFT, daily for first 5 days
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FI: fusion inhibitor																													
Enfuvirtide (Fuzeon®) (T-20)	Intravenous: usually as part of combination therapy 2 mg/kg IV twice a day (as infusion over 30 minutes) Method: To reconstitute the 108 mg vial slowly add 1.1 mL of water for injections from the vial of diluent provided to the vial of enfuvirtide powder. do not shake or invert the vial. The powder will	Experimental IV dosing regime Use only, as per birth plan, when benefit of giving outweighs the potential risks																											

	take up to 45 minutes to dissolve. The resulting solution contains 90 mg in 1 mL. Add 1 mL (90 mg) of the solution to 10 mL of water for injections, then further dilute to 45 mL with water for injections, do not shake or invert the syringe. The final solution contains 90 mg in 45 mL (2 mg in 1 mL) from which to administer the required dose	
PCP prophylaxis		
Co-trimoxazole (Septrin®) 240 mg in 5 mL liquid	<u>BW ≥2 kg</u> 120 mg = 2.5 mL <u>BW <2 kg</u> 60 mg = 1.25 mL ONCE a day on 3 days per week	Only HIV-infected infants, start at 4 weeks of age. May rarely cause rash and bone marrow suppression