Exposed: How

youths abuse

HIV medicine

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Kenyans are using emergency Aids

medication in place of safe sex,

according to health workers.

Instead of using condoms, many young

people are having unsafe sex then going

to public hospitals for the so-called PEP

pills.

This is a continuation of the abuse of

emergency contraceptive pills, which

is widespread despite its health consequences.

Post Exposure Prophylaxis is

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WORRYING TREND | Alarm over increasing cases of people asking for pills meant to shield health professionals from infection

Youths abusing

drugs meant for

HIV emergencies

emergency treatment, mainly for health workers and victims of sexual crimes. It is usually administered to those suspected to have come into contact with HIV-infected material.

The treatment must start within

72 hours of exposure and consists of a daily dosage of six tablets taken for 28 days.

Doctors are worried that those abusing the PEP pills do not take the full dosage, thus not only risking infection but also incubating a virus which is resistant to medication.

The drugs are only available in public hospitals and are provided at no cost. It is illegal for chemists to stock them.

When PEP was first introduced as an emergency drug to prevent HIV infection in the early 1990s, it was praised as a scientific breakthrough.

At the time, it was meant for health professionals who were at great risk of being infected with the virus in the line of duty. With time, it was made available to people exposed to the virus under circumstances, such as rape or sexual assault.

In the recent past, however, there has been a sharp rise in the number of people seeking the drugs, after engaging in unprotected sex especially during holidays and weekends.

Many of those asking doctors to give them the pills use them the same way others use emergency contraceptives — as an afterthought.

Many of them claim to have had “accidents” which exposed them to HIV. The accidents, according to

Nyeri County Aids and Sexually-transmitted

Diseases coordinator Jeniffer

Kiruri, range from sexual assault or a needle prick to a torn condom.

She said that between July and September,

the Nyeri Provincial General

Hospital gave the pills to more than

100 patients, most of them young people of 16 years and above.

This group is one of the most at the risk of HIV infection.

**Ask doctors**

Dr Enoch Ondari, the Kisii Level

Five medical superintendent, said the health centre received requests for PEP occasionally especially during

weekends.

“People do come to our facility to seek PEP services with the excuse of a burst condom. Normally, this happens during the weekends or on

Monday morning,” he said.

Hospital records indicate that more men than women ask doctors for the tablets.

Dr Martin Sirengo, the head of

National Aids and STI Control Programme

(Nascop), said there had

been an alarming rise in the number

of people abusing the drugs especially after weekends.

“We cannot deny them the drug because it is available,” he said.

But to qualify for a prescription, one must undergo thorough testing and provide contact details to the doctor giving the tablets.

This procedure is meant to make it difficult for middlemen to get the drugs for free from public hospitals and resell them.

Dr Juliana Atieno, the chief administrator at Jaramogi Oginga Odinga

Teaching and Referral Hospital in

Kisumu, said the hospital was one

of those that had developed strict guidelines on who should get PEP.

“Many people were coming for the

drug,” she said. “We had to lay down a

protocol. First, a person has to come

with the partner for testing,” she said.

“The partner must be traced for one

to get help.”

Dr Atieno warned that the drugs

should not be a licence for irresponsible

sexual behaviour.

“The drug’s effectiveness might backfire if you skip a dose. Why do you have to undergo that? You have a good option of using a condom,” she said.

Ms Monica Ndegwa, the Kieni

East District Public Health officer, said the uptake of the drug could be because young people wanted to take short-cuts.

“Just like in pregnancy pills, young people want to take short-cuts. My advice is, before you engage in anything, know the status of your partner,” she said.

Mrs Christine Otieno, a programme officer in HIV prevention at Kenyatta

National Hospital, said the demand for the drug shoots up especially during holidays and after weekends.

“We counsel the users first. They must finish the dose, otherwise they may be resistant to ARVs in the event they acquire the virus,” she said.

According to her, some of those seeking the drug are genuine cases of rape.

“Others come with that excuse yet they did it willingly, but we cannot deny them the service,” she said.

Additional reporting by Muthini

Stephen

PEP is a combination of two drugs: Aluvia and Combivin and

is only available at no cost in public hospitals.

**A person for whom PEP has been prescribed is required to swallow six tablets in a day for 28 days. One takes three**

**tablets — two Aluvia and one Combivin — twice a day.**

PEP is not a simple morningafter

pill: it is a month-long course of treatment.

**PEP treatment must begin within 72 hours of exposure to**

**HIV. The sooner the treatment starts the better.**

The drug is mostly used within the health sector as part of a

comprehensive precautions package that reduces staff exposure

to infectious hazards artwork.

**An exposed health care worker**

**should proceed with treatment**

**only after informed consent.**

Among the common side effects

of PEP are nausea and diarrhoea.

BACKGROUND

Tablets must be

taken for 28 days