**Raltegravir (RAL)**

3rd line drug information for the Clinician

**Class:** HIV-1 integrase strand transfer inhibitor (HIV-1 INSTI)

**Dose:**

1. Adults: 400 mg BD p.o. (1 film coated tablet) with or without food

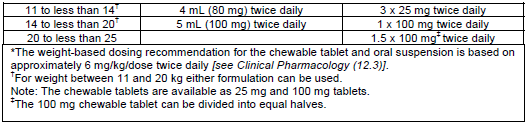
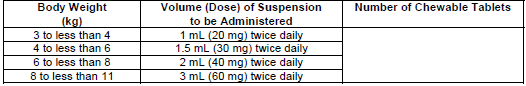
If the patient is on Rifampicin TB treatment, dose at 800 mg BD o.o. until 2 weeks after Rifampicin is stopped or completed

2. Children:

For HIV patients 4 weeks of age and older

- ≥25 kg: 400 mg BD p.o. with or without food

- 3 kg to < 25 kg: Weight based dosing at 6mg/kg dose, as specified below:



Each single-use RAL oral suspension contains 100 mg of raltegravir which is to be suspended in 5 mL of water (giving a final concentration of 20 mg/mL). Pour packet contents of RAL for oral suspension into 5 mL of water and mix. Once mixed, measure the recommended volume (dose) of suspension with a syringe and administer the dose orally. The dose of suspension should be administered orally within 30 minutes of mixing, the rest is discarded.

**Side-effects:**

**Most common adverse effects:** insomnia, headache, dizziness, nausea, diarrhea, LFT elevations

**Most significant adverse effects:**

**-**Severe Skin and Hypersensitivity Reactionsin 0.4%, (potentially life-threatening/ fatal) Stevens-Johnson syndrome, Toxic epidermal necrolysis

-Hypersensitivity reactions = rash + constitutional findings (fever, general malaise, fatigue, muscle/joint aches, blisters, oral lesions, conjunctivitis, facial edema, hepatitis, eosinophilia, angioedema).

-Hepatitis and hepatic failure.

-Depression and suicidal ideation (in patients with pre-existing psychiatric illness),

-Rhabdomyolysis

*Other useful information:*

*1. Patients with Hepatitis B and/or C infection can be given RAL with monitoring of LFTs (if possible)*

*2. No dosage adjustment is necessary for patients with mild to moderate hepatic impairment and in patients with severe renal impairment*

*3. RTG can be given to pregnant women*

*4. Breast-feeding women can be given RTG though it is not known if RTG is secreted into breast milk*

*5. Discontinue RAL immediately if a severe reaction occurs*

**Drug-Drug Interactions:**

Raltegravir is neither an inducer nor an inhibitor of the cytochrome P450 enzyme system or the P-gp transport system therefore can be co-administered with the following drugs and drug classes: hormonal contraceptives, NRTIs, etravirine, protease inhibitors, calcium carbonate antacids and proton pump inhibitors such as omeprazole.

Raltegravir is metabolized through glucuronidation as such will be affected by inducers and inhibitors of this enzyme. Rifampicin is an inducer of UGT1A1 as such will reduce the level of raltegravir; hence the dose of raltegravir will be doubled during co-administration with Rifampicin.

Metal containing antacids (aluminium and magnesium) reduce the levels of raltegravir therefore should not be co-administered.

If you need to co-prescribe any other drugs with RTG, check for potential for dangerous interactions on the following website: <http://www.hiv-druginteractions.org/> or the British National Formularly or contact the Pharmacovigilance centre at College of Medicine.

Discourage patients from using herbal medicines or drugs bought on the streets and at the market.

WRITTEN INFORMATION TO BE GIVEN TO THE PATIENT

**RALTEGRAVIR**

This is a pill used in combination with other pills to suppress HIV. It stops the virus from multiplying by blocking one of its enzymes called integrase.

Take 1 tablet twice daily with or without food.

If you are on TB treatment, you will be told to take 2 tablets twice daily.

Do not take stomach acid medication such as Magnesium trisilicate/carbonate or aluminium hydroxide.

Some side effects of Raltegravir may include headache, lack of sleep, nausea and stomach pain. These will improve over days or weeks.

Report to your clinic if you develop rash that may include sores in the eyes, mouth and on the skin with fever; yellowing of eyes and muscle pains. Your medicine may need to be stopped.

Report to your clinic if you experience anything else that you think may be related to your taking this medicine.

Once it has done its work in the body, Raltegravir is removed from the body via the liver, as such other medicines and herbs can affect this process which can result in the levels of this medicine in the blood to be too low or too high. It is very important that you take medicines and vitamins prescribed by the doctors and nurses in your clinic. Do not take herbal medicines or medicines sold on the streets or at the market while you are taking Raltegravir.