HIV Post Exposure Prophylaxis (PEP)

Diagnostic Treatment Recommendations, Patient Handouts, Referral Guidelines

**Diagnostic/Treatment Recommendations:**

- **Non Occupational Post Exposure Prophylaxis (nPEP) is intended for individuals of negative or unknown HIV infection status following potential exposure to HIV** (see algorithm)
  - **Timing**
    - Must be within 72 hours or as soon as possible after exposure
  - **Exposure Type** (see patient information sheet for risk stratification)
    - Receptive anal intercourse
    - Shared injection drug use equipment
    - Insertive anal intercourse
    - Receptive vaginal intercourse
    - Insertive vaginal intercourse
    - Other potentially infectious body fluid on a mucous membrane or non intact skin
    - Receptive oral intercourse with ejaculation (consider due to lower risk; if oral pathology, risk is higher)

- **Exposure evaluation**

  **nPEP recommended**
  
  **Exposure** of vagina, rectum, eye, mouth or other mucus membrane non intact skin, or percutaneous contact *with* blood, semen, vaginal secretions, rectal secretions, breast milk or other body fluid that is visibly contaminated with blood when source is:
  - Known to be HIV infected
  - Men who have sex with men (MSM) of unknown HIV status
  - Injections drug user (IDU) of unknown HIV status
  - Anonymous

  **nPEP case by case consideration**
  
  Unknown HIV status and risk factor

  **nPEP not recommended**
  
  **Exposure** of vagina, rectum, eye, mouth, or other mucus membranes intact or non intact skin, or percutaneous contact *with* urine, nasal secretions, saliva, sweat, or tears if not visibly contaminated with blood **regardless** of the known or suspected HIV status of the source

- **MEDICATIONS - nPEP Interventions**
  - **Source unknown HIV status:** Preferred regimen is nucleoside Combivir (zidovudine + lamivudine)
  - **Very high risk exposure or known HIV status:** Consider adding a Protease inhibitor (Kaletra or others) or when resistance characteristics make it difficult to construct a potent two nucleoside regimen.
  - **Contraindicated for nPEP:** Full course nevirapine.
  - **Source known to be HIV infected:** Obtain information regarding source’s viral load and CD4 count, medication and drug resistance history.
  - **For all nPEP:** Guidance and consultation to be provided for all cases by immediately
paging the ID physician on call. If unavailable, page Dr. Sally Slome (805-2335) or Dr. Michael Horberg (415-999-7284). If local consultation is unavailable, call the National Clinicians’ Post Exposure Prophylaxis Hotline 1-888-448-4911 (24 hours / 7 days).

- **Duration of therapy**
  - 28 days  *(DISPENSE ONLY 5 – 7 DAYS ONLY)*

- **HIV Antibody Testing**
  - Baseline HIV antibody testing (consider rapid test if available, viral load testing not indicated), (consider 4-6 weeks), 2-3 Months and 6 Months

- **Other testing and treatment**
  - STD screening and treatment
  - Hepatitis B screening, Hepatitis C screening for at-risk populations
  - Hepatitis A and B immunizations as indicated
  - Post-coital contraception if desired
  - Pregnancy testing

**Patient Handouts:**

- **Non Occupational Post Exposure Prophylaxis (nPEP) Patient Information Sheet** – (Very IMPORTANT for patient 2 pages)
- **Combivir Information Sheet** – (Very IMPORTANT print and give to patient 1 page)

**Referral Guidelines:**

- **Page ID physician on call for guidance and resistance consultation on all nPEP cases. If unavailable, page Dr. Sally Slome (805-2335) or Dr. Michael Horberg at 415-999-7284**
- **Send eConsult for all nPEP patients.**
  - All patients initiated on nPEP will be followed by the local ID specialist or HIV clinic for completion of nPEP protocol, counseling and referrals.
  - OCCUPATIONAL exposure: All staff exposure to HIV must be treated and followed by Occupational Medicine. If evening, weekend, holiday send to ED
  - Perinatal exposure: pediatric patients are followed through the Pediatric Department, contact Katrina Saba 8-492-1422