

This information is a portion of the CCC PEP Quick Guide. It is intended to be used in conjunction with the Quick Guide and not as a standalone document.

How to choose a PEP regimen?

Three-drug PEP regimens are now the recommended regimens for all exposures. The most recent guidelines no longer require assessing the degree of risk for the purpose of choosing a “basic” two-drug regimen vs. an “expanded” three-drug regimen, which was confusing for many treating clinicians. There are some special circumstances, however, in which a two-drug regimen can be considered/used, especially when recommended antiretroviral medications are unavailable or there is concern about potential toxicity or adherence difficulties. In addition, the Guidelines state, “PEP is not justified for exposures that pose a negligible risk for transmission.” Consultation with an expert can help determine if the exposure poses a “negligible risk” to explore whether alternative approaches, including a modified regimen, are appropriate.

PREFERRED 3-DRUG HIV PEP REGIMEN:

<p>Truvada™ 1 tablet by mouth once daily [co-formulated Tenofovir DF (Viread®; TDF) 300mg + emtricitabine (Emtriva™; FTC) 200mg]</p> <p>PLUS</p> <p>Raltegravir (Isentress®; RAL) 400mg by mouth twice daily or dolutegravir (Tivicay™) 50 mg PO once daily Duration: 28 days</p>
--

ALTERNATIVE REGIMENS*

May combine one drug or drug pair from the left column with one pair of nucleoside/nucleotide reverse transcriptase inhibitors from the right column.

Raltegravir (Isentress®; RAL)		Tenofovir DF (Viread®; TDF) + emtricitabine (Emtriva™; FTC); available co-formulated as Truvada™
Dolutegravir (Tivicay®; DTG)		Tenofovir DF (Viread®; TDF) + lamivudine (EpiVir®; 3TC)
Darunavir (Prezista®; DRV) + ritonavir (Norvir®; RTV)		Zidovudine (Retrovir™; ZDV; AZT) + lamivudine (EpiVir®; 3TC); available co-formulated as Combivir®
Atazanavir (Reyataz®; ATV) + ritonavir (Norvir®; RTV)		Zidovudine (Retrovir™; ZDV; AZT) + emtricitabine (Emtriva™; FTC)



CLINICIAN CONSULTATION CENTER

National rapid response for HIV management and bloodborne pathogen exposures.

Lopinavir/ritonavir (Kaletra®; LPV/RTV)		
Etravirine (Intelence®; ETR)		
Rilpivirine (Edurant™; RPV)		

**Note: For additional information on dosing, drug-drug interactions and toxicities, and toxicity monitoring, see the [antiretroviral drug tables in the Pharmacy section](#) of the CCC website.*

ARV Drug Dosing and Toxicity Monitoring*

HIV meds	Adult Dosing	Combination Form	Toxicity monitoring
Tenofovir DF	300 mg by mouth once daily	Truvada™	BUN, Creatinine, LFTs
Emtricitabine	200 mg by mouth once daily		Rash
Raltegravir	400 mg by mouth twice daily		Nausea, headache
Dolutegravir	50 mg by mouth once daily		Headache, insomnia
Zidovudine	300 mg by mouth twice daily	Combivir®	CBC, LFTs
Lamivudine	150 mg by mouth twice daily		Rash
Lopinavir/ritonavir (200/50 mg)	2 tabs by mouth twice daily	Kaletra®	GI toxicity, especially diarrhea. LFTs *Note: Lopinavir/ritonavir has many drug-drug interactions with common medications; use with caution (see below).

**Note: For additional information on dosing, drug-drug interactions and toxicities, and toxicity monitoring, see the [antiretroviral drug tables in the Pharmacy section](#) of the CCC website.*