PEP or Post Exposure Prophylaxis



PEP is a course of anti-HIV medication that anyone can take if they are concerned they have been exposed to HIV through unsafe sex, a broken or slipped condom, needle-stick injury or through sharing equipment while injecting drugs within the last 72 hours.

It is thought that PEP may significantly reduce the risk of acquiring HIV if you are exposed to it; however, it's not proven to stop HIV transmission, so it shouldn't be used instead of condoms.

Just because you've had a risky experience doesn't mean you need to have PEP.

This is why it's important to talk to a doctor who is trained in anti-HIV medications, a sexual health service or emergency health service.

They will help you to establish risk factors and decide if it's right for you.

What are you going to be reading about?...

- Things you and your doctor will talk about
- When should you take PEP?
- How do you take PEP?
- Does PEP have any side-effects?
- Do you need to continue seeing your doctor after you've finished taking PEP?
- Where you go to get PEP
- What happens when you go for an appointment to pick up PEP?
- Places that prescribe PEP

Things you and your doctor will talk about

When deciding if you should take PEP, you and your doctor will talk about your 'risk factors'.

It will include talking about what happened to make you think you may need PEP, how much time has passed since the incident and what makes you think the person you had the risky event with may be HIV-positive. Statistics show that certain groups of people are more likely to have HIV than others, and while sex workers are not at high risk of getting HIV, certain behaviours are more likely to increase the chances of transmission.

Given that we know so little about our clients and their behaviours, you have good reason to expect to be given PEP if you want it after a condom break. Your doctor will talk to you about this and discuss what it means for you.

"Not all doctors are able to prescribe PEP, so you need to see one who can."

When should you take PEP?

PEP works best if taken as soon as possible after the risk event, although you can take it up to 72 hours (3 days) later.

If you have a broken condom for example, it's ideal if you can get to a sexual health service that provides PEP within 2 – 3 hours.

If it's more than 72 hours later, it's still a good idea to talk to your doctor or sexual health service because they will be able to advise when to check for sexually transmissible infections (STIs) and take blood tests and check for other STIs.

Importantly, they can talk through what happened with you and may be able to put your mind at ease or work out other strategies for dealing with the situation.

How do you take PEP?

PEP can be a combination of 2-3 different kinds of anti-HIV medication that you need to take twice

a day at set times for 4 weeks. If you miss a dose or take it late, it can mean the medication doesn't work as well.

Does PEP have any side-effects?

The drugs are very strong and can cause side-effects that may include nausea, vomiting, abdominal pain, diarrhoea and headaches.

These side-effects may last the entire 4 weeks you're on the medications although not everyone experiences side-effects.

"PEP needs to be taken within 72 hours of the risk event."

Do you need to continue seeing your doctor after you've finished taking PEP?

You will need to keep going to your doctor or sexual health service after you finish taking PEP for follow-up blood tests. They'll ask you to go for testing at

- 6 weeks
- 3 months
- 6 months

Where you go to get PEP

You can only get PEP from a doctor who is trained in anti-HIV medications, a sexual health service or the emergency department at a hospital. Depending on where you go to get PEP there are certain things you need to be aware of.

Sexual health services—You need to call ahead if possible and let them know that you need PEP.

Sometimes they may not have a doctor there for you to talk to, or they may not have enough appointments in the day to see you. If this happens, they will refer you to an A&E in a hospital.

If they refer you to Emergency, it's important to ask them if they can call ahead to let them know you are coming and to explain what you need.

If you have any problems in Emergency (they may not know what you're talking about or leave you waiting when you should be seen immediately), get them to call the sexual health service so that they can advocate on your behalf to make it an easier process for you.

Emergency Departments—The main issue with going to Emergency is that the staff you see there may not know what PEP is.

If you're able to, call ahead or ask someone at Respect Inc to call ahead for you when you make the booking or attend Emergency.

If it's the weekend and you can't do any of these things, write down on a piece of paper exactly what you need so you can clearly explain it to the hospital staff: "I need prophylactic HIV anti-retroviral medication or Post Exposure Prophylaxis (PEP) because I've had an incident where I may have been exposed to HIV. I need to take the medication as soon as possible to ensure it works as well as it can and the guidelines say I need to be seen ASAP".

If they still don't know what it is, ask them to Google it!

"Your PEP provider will help you decide if you should take it" "Don't forget to get your follow-up blood tests done."

Doctors—Not all doctors are able to prescribe PEP, so you need to see one who can.

Doctors who are trained to give PEP are generally located in sexual health services or A&Es, or are GPs who work a lot with HIV positive, gay, lesbian and transgender communities.

You can Google 'doctors' and ask them on the phone if they have a doctor who is able to prescribe PEP.

What happens when you go for an appointment to pick up PEP?

If you go to a sexual health service or Emergency, when you get there let them know you are there for PEP and need to be seen ASAP. The reception staff may ask you how long it has been since you

had the incident so that they can let the nurses know.

- You'll see a nurse who will triage you and ask questions to work out what the risk factors are and if you're in the right window period to take PEP. The nurse will work with you on strategies for dealing with the situation whether you take PEP or not.
- The nurse will speak to a doctor who is trained in anti-HIV medications and discuss everything you have said. The doctor will then decide whether to prescribe it or not.
- 3. If you're going to be prescribed PEP you'll be given pre-test counselling, which is where a nurse or psychologist will talk with you about what will happen if your tests come back positive or negative for HIV, how HIV is transmitted, and not transmitted, and what exactly is involved in taking PEP.
- 4. You'll be given a blood test to establish a baseline of what's happening with your blood, because this will change when you begin taking PEP and they need to measure what's going on in your blood to see how you're going.
- 5. You'll be given a 3 day starter pack of medication for PEP treatment and they'll explain how and when to take it and possible side-effects. Follow-up appointments will also be made for you to come in for further blood tests. You will be asked to return in 3 days to assess how you are coping and to collect the 30 day supply of medications.
- 6. The 3 day starter pack is generally free. The medications given to people requiring PEP are very expensive and while federal government subsidies the greater proportion of the cost you will be required to pay a co-payment for the months supply of PEP. Depending on your risk, you may be prescribed 2 or 3 different HIV drugs.

"PEP needs to be taken at the same time everyday."



Disclaimer:

All material in this fact sheet is provided for your information only and may not be construed as legal, medical or health advice or instruction.

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