

Guide to taking HIV PEP

Follow-up Visits

You have decided to take HIV PEP. We will be working with you to help you take this medication. Here is a check list of what will happen at each visit:



Initial Visit (today)

Date

- You will be given one dose of each of the HIV PEP medications to take at the hospital as an early prevention measure
- You will be given a ___-day supply of medications to take with you.
- You will have blood tests done to make sure your body is healthy enough to take the medications.
- You may have blood taken to be tested for HIV

1st Follow Up Visit

Date

Within 2 to 4 days

- We will review with you the risk of HIV transmission, how you are feeling about your risk and whether you want to continue the medications.
- We will review how to take the drugs and the importance of taking every dose on schedule.
- We will discuss any side effects you may be having and how to deal with them.
- We will discuss any other drugs/medications you are taking that may interact with the HIV PEP medications.
- You will be given a _____ day supply of HIV PEP medications.

2nd Follow Up Visit

Date

1 week after initial visit

- We will discuss any side effects you may be having and how to deal with them.
- We will discuss any problems you may be having with the drug schedule.
- We will discuss any other drugs/medications you are taking that may interact with HIV PEP medications.

3rd Follow Up Visit

Date

2 weeks after initial visit

- You will be given a _____ day supply of HIV PEP medication.
- You will have blood tests to make sure your body is healthy enough to keep taking the medication.
- We will discuss any side effects you may be having and how to deal with them.
- We will discuss any problems you may be having with the drug schedule.
- We will discuss any other drugs/medications you are taking that may interact with HIV PEP medications.

4th Follow Up Visit

Date

3 weeks after initial visit

- You will be given a _____ day supply of HIV PEP medications.
- We will discuss any side effects you may be having and how to deal with them.
- We will discuss any problems you may be having with the drug schedule.
- We will discuss any other drugs/medications you are taking that may interact with HIV PEP medications.

5th Follow Up Visit

Date

4- 6 weeks after initial visit (in person or by phone)

- We will review how you are doing and answer your questions.
- We will recommend HIV testing
- We will discuss whether you finished HIV PEP, and if any side effects you had are now gone.

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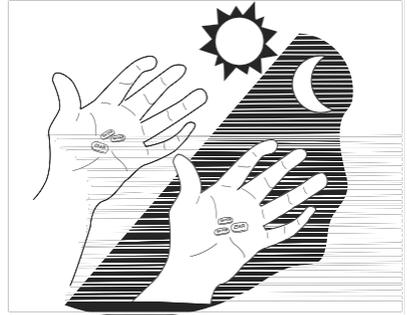
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Introduction

After talking with your Health Care Provider, you have decided to take the HIV Post-exposure prophylaxis (PEP) medications. These drugs reduce your risk of becoming infected with HIV. This booklet gives you more information about the medications you'll be taking. It describes your treatment schedule and gives advice on coping with side effects if they occur.

The three most important things about taking the HIV PEP treatment are:

1. Follow the treatment schedule carefully (take 1 Truvada® tablet and 1 Tivicay® once a day)
2. Keep every follow-up appointment with your Health Care Provider.
3. Try to answer questions about other drugs and medications you may be taking. Talk to us if you think you are pregnant or have other health concerns.



This guide book will help you take HIV PEP by helping you manage the treatment with as few side effects as possible. Remember, we are here to support you over the next 28 days and answer your questions.

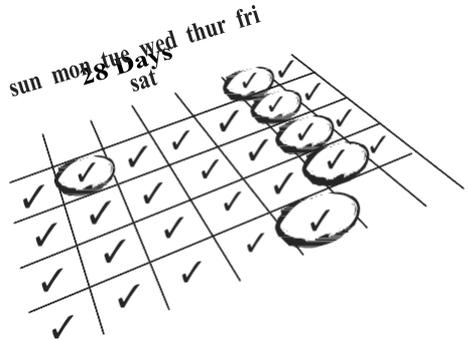
OK, I've decided to take HIV PEP. What happens now?

While you are in the emergency/treatment centre:

1. You will receive a ___ day supply of the HIV PEP medications.
2. You will look over this booklet with the nurse or doctor.
3. We will give you the first dose of each medication. The sooner you start, the more likely they will work.
4. We will give you more instructions about how to care for yourself at home.
5. We will work out a date and time with you for your first follow-up appointment.

What happens after I leave the emergency/treatment centre?

1. You will visit your Health Care Provider every week for four weeks (28 days). During this time you will be taking the medicine as directed, every day. Your visits let us monitor your progress, give you more HIV PEP medications and check for side effects.



2. Don't be afraid to ask any questions you may have. Write them down so you won't forget them when you visit your nurse, doctor or pharmacist.
3. If you are taking the HIV PEP medications, it is recommended that you have a baseline testing for sexually transmitted infections including Hepatitis B and C, syphilis and HIV. We can do the tests here or if you want to have an anonymous test, we can tell you where you can go (if it's available in your area). You and your Health Care Provider will want to know whether or not you were HIV-positive before the assault. Many people who are HIV-positive don't know it. It is important for us to know if you are already HIV-positive, because if you are, you will need different medications than these ones.
4. We recommend that you have a blood test for HIV between 4-6 weeks after the assault. Some people react to the virus more slowly, so you should also have tests again at 4 months to be sure. Your Health Care Provider will do this testing or will refer you for anonymous testing.
5. There are detailed information pages about each of the medications at the back of this book. Please read about Truvada® and Tivicay® and ask questions if something isn't clear. These medications are going to affect your life for the next 28 days. You should know as much as possible about how they

work and the side effects you might experience

Follow Up

Why are there so many follow-up sessions? Can't you just give me all the tablets at once?

It may seem like a lot of visits but they are really important. They let us watch you for any signs of a reaction to the drugs. They give you a chance to ask questions you think of later. If you have side effects, we can suggest ways to cope. We can do blood tests to make sure everything is okay. Most people who have been through this say the follow-up visits have helped them.

Giving the tablets out in small amounts lets us see you regularly. It gives us a chance to check your dose and change your medications if something else is needed.

Why is it so important to follow the drug schedule?

Taking the medication on a regular schedule helps fight the virus. It keeps a high level of drug in your blood over the whole 28 days. If you take the medications once in a while or skip doses, the medication won't work as well and some of the virus might survive. During times when there was only a small amount of drug in your blood, some of the virus might get used to the drug. We call this drug resistance. A drug resistant virus has "learned" how to defend itself against the treatment. If the virus in your system became drug resistant, you would not be able to take these drugs later, if they were needed to treat HIV.

That's why it's so important to take the medications on time, and not skip or lower the doses.

What if I miss a dose?

If you do miss a dose, take it as soon as you remember that day. Then continue on your regular schedule. Do not take two doses together. If it is less than 4 hours until the next scheduled dose, don't take the tablets you missed, just return to the regular schedule and try to take the next doses on time.

At your next visit please tell us if you have missed any doses.

If you miss 2 doses in a row, you should call your health care provider immediately. You may need to stop taking the HIV PEP medication as it will no longer be as effective.

If I decide to start and then change my mind, what happens if I don't finish the treatment?

That's okay. You can always decide to stop. Some people begin the treatment and stop after a few days, after they have had more time to think about their HIV risk. Other people find the medication schedule or side effects difficult. The nurse or doctor will help you complete the program if you want to, but no one will force you to continue.

It is important to take these medications at regular times, according to the schedule we have talked about. If you cannot follow the schedule, stop taking the medication rather than taking them less often. Taking the medication off and on might let the virus become resistant, making it more difficult to treat HIV should you become infected at a later date.

If you are having trouble with the medications, please talk to us. We may have ideas to help you cope. If you decide to stop taking the drugs, it is also a good idea to come in and talk about it first.

Does HIV PEP have side effects?

Yes, side effects can happen. The most common ones are headache, nausea, stomach ache, diarrhea, and feeling tired. Some people have a hard time with these symptoms. About half of the people who take the medication need to take some time off work or school.

A very small number of people have to stop taking them because of serious reactions or abnormal blood test results. Side effects should go away once you stop the treatment.

Health Care Providers working at the SA/DVTCs have learned ways to help you manage these side effects. Drugs available in any drugstore like TUMS®, Gravol®, Aspirin®, Tylenol®, and Imodium® can help you cope with these symptoms. Changes to diet or temporary changes in your habits can also help.

More serious side effects are possible. People living with HIV who take these medications take them for a long time. Eventually some of these people do develop serious side effects. These are unlikely in 28 days of treatment. However, while you are taking Truvada® and Tivicay® (HIV PEP), we will follow your health closely.

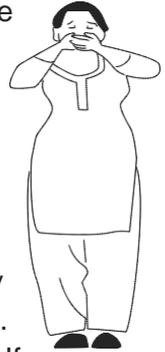
Being assaulted can also cause side effects. Some of these are the same as the side effects of HIV PEP. Headaches, fatigue, loss of appetite and nausea, as well as trouble sleeping are all symptoms reported by people after a sexual assault. Others say they feel confused, have difficulty making decisions or have dramatic changes in mood. None of this is related to HIV PEP, but if you do respond to the assault in these ways your drug side effects may feel worse.

Managing HIV PEP Side Effects

Here are some ideas about managing some common HIV PEP side effects. If you do get any of these symptoms, or have any other problems, we can help you work out how best to deal with them.

Nausea (upset stomach, queasy feeling) and **Vomiting** (throwing up)

Take your drugs with meals to help reduce these problems. Nausea is often worse on an empty stomach, so try to eat small meals every few hours. Eating slowly can help. Sometimes it is the smell of food cooking that bothers you. Dry food (e.g., crackers, granola), or cold food, may be easier to take.



Drink lots of fluids between meals. If you need to rest, try to keep your head propped up higher than your feet. Avoid physical activity immediately after eating. If necessary, take an anti-nausea tablet (e.g., Gravol®) 30-60 minutes before your medication dose or before eating. Please talk to us or your pharmacist before taking any medications, remedies or herbal preparations.



Foods to avoid:

Try to avoid milk and dairy products for three days; fried, fatty, greasy and spicy foods; pork, veal, salmon and sardines; raw vegetables such as parsnips, beets, sauerkraut, corn on the cob, cabbage family, onions; citrus fruits: pineapples, oranges, grapefruits, tomatoes; cherries, grapes, figs, currants, raisins, rhubarb, seeded berries; extremely hot or cold beverages; alcohol; coffee and caffeinated sodas.



You may also want to try the BRAT diet (BRAT stands for bananas, rice, apples and toast) to manage nausea, vomiting and/or diarrhea.

What to do if you vomit

First six hours

For six hours after vomiting, don't eat anything. Give your stomach a rest. After one to two hours, suck on a hard candy or popsicle (no chewing). Try ice chips or sips of water if you still feel sick.

First 24 hours (Day 1)

Slowly start clear liquids if the vomiting has stopped, starting with a sip or two every ten minutes. Some options include water, apple juice, flat soda, weak tea, jell-o (in liquid or gelatin form), broth or bouillon (clear base from non-greasy soup). If nausea or vomiting return, begin the process again, taking nothing by mouth for an hour or so.

First 48 hours (Day 2)

Begin to add bland foods like bananas, rice, applesauce, crackers, cooked cereals (Farina, cream of wheat), toast and jelly.

First 72 hours (Day 3)

Move to a “regular” diet by adding things like soft cooked eggs, sorbet, stewed fruits, cooked vegetables, white meat of chicken or turkey.

If you vomit, drink lots of water or liquids to avoid dehydration. Rest and avoid exertion to give your body a chance to recover. Call us about taking any drug to prevent nausea.

Call your Health Care Provider within 48 hours if you can't eat solid foods at all, or if you have symptoms of fever, weight loss, lightheadedness (feeling faint or dizzy), rectal bleeding or abdominal pain, or if nausea lasts more than two to three days.

Adapted in part from material available from the American College Health Assoc. 9/ 97,8 / 00,9/ 06 CCS University Health Service.

What if I vomit after taking the medications?

If you vomit within 30 minutes of taking HIV PEP, OR if you can see the tablets in your vomit:

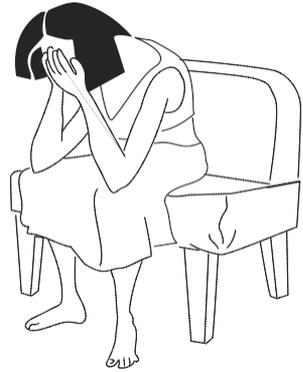
- Repeat the dose

If you vomit more than 30 minutes after taking HIV PEP:

- Continue your regular dosing schedule

Fatigue (feeling tired or having no energy)

People on HIV PEP often feel tired. This can be a drug side effect, but there may also be other causes. You may be eating less and not getting enough vitamins or minerals. Drug side effects like diarrhea, lack of sleep, pain or muscle weakness can make you tired. Anxiety and depression related to the assault can also cause fatigue.



Listen to what your body is telling you.

Try to adjust your lifestyle, to let yourself rest. Here are some tips:

Take it easy

Don't try to do everything. Decide what's important to do each day and know your limits. Schedule activities with "higher energy" times of day, ask others to help (chores, shopping), take frequent breaks, and get a good night's sleep.

Try to eat well

Stick to a healthy diet as much as possible, make easy-to-prepare meals; prepare extra portions for freezing

Stay active

Some people find physical activity helps them relieve stress and actually gives them energy. Be sure to scale down to lighter exercises (walk instead of jog). Consider trying less physical exercises and therapies (such as yoga, tai chi, massage or acupuncture).

Adjust your environment

Change or reduce work hours if necessary. At home and/or work, make sure things you need are within easy reach.

Take care of your emotional self

Give yourself the time and space to figure out what you need and how you are feeling. Take advantage of your support systems - this can include informal circles like friends or family. We can also refer you to services like counseling and support groups.

Medication to increase physical energy levels or to address emotional health is available. Talk to your Health Care Provider before taking any medication for physical or mental fatigue

Diarrhea (watery, loose bowel movements)

If your stools are loose and watery, you lose a lot of water. Try to eat breads and cereals, peeled fruit and vegetables. Drink 8-10 cups of fluid every day. This works best if you drink between meals. Try to avoid foods or liquids that contain caffeine, alcohol, or lots of fat (see list below.)

Try to Eat/Drink:

- ✓ Lower-fiber foods or foods rich in pectin, such as: refined cereals, white bread, buns, bagels, plain white rice, or pasta.
- ✓ Lower-fat foods such as: meat with the fat trimmed, skinless chicken breasts, any broiled, baked, roasted, barbequed, steamed or microwaved foods with little added fat, eggs, lower-

fat cheeses, fish canned in water.

- ✓ Foods and drinks that have lots of sodium or potassium (such as broth, sports drinks, bananas and melons).
- ✓ 8-10 cups of liquid per day – better between meals rather than with meals.

Try to Avoid:

- ✗ Foods that stimulate the bowels, such as: coffee (including decaffeinated), strong tea, soft drinks, chocolate and cocoa, alcohol, prunes and prune juice, some herbal products, foods with large amounts of sugar (e.g., candies, juices and fruit drinks), and spicy foods.
- ✗ High-fiber foods such as: bran and bran cereals, whole grain breads, beans, lentils, corn, peas, berries, grapes, popcorn, nuts, seeds, dried fruits (like raisins and prunes), vegetables, and fruits with seeds and skins.
- ✗ High-fat foods such as bacon, pepperoni, cold cuts, and fried/deep-fried foods.
- ✗ Dairy products, which can make diarrhea worse. Avoid milk products for a while. When diarrhea settles, try small amounts of Lactaid® or Lacteeze milk.

If you have these symptoms, your body is losing too much water:

- Very dry mouth.
- Feeling dizzy, weak, or fainting.
- Urine (pee) is darker yellow than usual, and you are urinating less often or much smaller amounts than usual.
- Weight loss (more than 2 lbs (1kg) in one week).

Please call us if you notice any of these symptoms. If you notice blood in your stool, you should also let us know.

Headaches (pain, ache or throbbing in the head)

Try to rest. Avoid reading or exercise. Put a cold cloth to your forehead. Over-the-counter pain relievers such as ASA (e.g., Aspirin®), or acetaminophen (Tylenol®) can help. Talk to your Health Care Provider about which (if any) pain reliever is best for you. Follow the schedule on the label and take these pain relievers regularly. Don't wait for the pain to become severe. Alternative therapies such as acupuncture, acupressure, yoga, meditation, biofeedback, or relaxation tapes can also sometimes help manage headaches.



On your visits, let us know if you are experiencing headaches. Tell us if they change in pattern or location.

Rash (skin irritation)

If you get a rash be sure to tell your Health Care Provider. They will want to know the following information: Where is the rash? What does it look like? Is it itchy? Is it blistering? Do you have a history of allergies? What have you been doing to manage the rash? When did it start? They may want to see a list of the other medications you are taking.

Here are some tips to control a rash and lessen the discomfort:

Try to:

- ✓ Drink lots of water
- ✓ Follow a healthy diet
- ✓ Take showers or baths less often and use warm (not hot) water
- ✓ Use lanolin-based (not detergent-based or anti-bacterial) soap (e.g., Jergens Naturals®), and apply moisturizing cream afterwards
- ✓ Use a humidifier in the bedroom at night to soothe dry skin
- ✓ Wear looser fitting, cotton clothes over the affected area



Try to avoid:

- ✗ Rubbing and scratching
- ✗ Over-dressing (it causes sweating)
- ✗ Tight fitting clothing,
- ✗ Dry, air-conditioned environments

Antihistamines or Tylenol® (acetaminophen) can sometimes help. Talk to your Health Care Provider before taking any medication. In cases of severe rash, a change in HIV PEP medications may be needed.

A rash combined with a fever, blistering, or sores can be very serious. See a doctor right away.

Fever (abnormally high body temperature)

Usually a fever is only treated when it is above 100.4°F (38°C). Fight a fever by drinking slightly warm liquids. Avoid anything that causes shivering (e.g., drafts, sponge baths, and ice packs). If you take Tylenol® (acetaminophen), follow the recommended limits on the packaging of 4 grams per 24 hours (equal to 2 regular strength Tylenol® every 4 hours, or 2 extra-strength tablets every 6 hours). Call your Health Care Provider before taking any medication and if your fever lasts more than 2 days.

WHEN TO CALL THE DOCTOR

At your follow-up appointments, your Health Care Provider will ask you about any problems. These appointments are a chance to tell us about symptoms and check before you start any medication.

If you experience any of the symptoms below, don't wait until your next appointment - contact your Health Care Provider right away. If they cannot be reached, contact your family doctor or closest hospital emergency department. If you have any other symptoms that you are worried about, call your Health Care Provider. You can also call Telehealth (1-866-797-0000; TTY: 1-866-797-0007) for immediate, confidential medical advice. Be sure to let them know you are taking HIV PEP medication so they can treat you properly.

Nausea & vomiting: If you haven't been able to eat solid foods at all for 48 hours (2 days), if nausea lasts more than two to three days, or you have persistent vomiting for over 24 hours or vomiting accompanied by severe headache, dizziness/light-headedness, fainting, abdominal pain, or blood.

Fatigue: You are feeling confused or dizzy, have blurred vision, or think you might be dehydrated.

Diarrhea: You are having diarrhea with blood in it, have noticed sudden weight loss (more than 2 lbs (1 kg) in one week) or, are having symptoms of dehydration. These symptoms include:

- feeling dizzy, weak, or fainting
- urine (pee) is darker yellow than usual; and/or amount and frequency of urine is less than usual
- weight loss of more than 2 lbs (1kg) in one week
- dry mouth and lips

Headache: If you experience headache with any of the following characteristics or symptoms:

- that has changed pattern or location
- accompanied by shortness of breath, fever, and/or unexpected symptoms that affect your eyes, ears, nose, or throat
- accompanied by dizziness and feeling of unsteadiness, slurred speech, weakness, or changes in sensation (numbness and/or tingling)
- that makes you feel confused or drowsy
- accompanied by persistent or severe vomiting

Rash: You have a rash combined with a fever, blistering, or sores.

Fever: You have had a fever for more than 2 days or higher than 104°F (40°C).

Testing for HIV is voluntary. Like all medical care, it is also confidential. However if you want to make sure no one knows, you can choose anonymous testing, where a number or code is used on your lab report. Testing done at your doctor's office or at a clinic requires your name and OHIP information. If you test positive for HIV, the doctor is required by law to report your name, address, date of birth and other personal information to public health authorities. If you want your tests to be anonymous, ask your follow-up nurse if anonymous HIV testing is available in your area and where you can go to get tested.

We recommend that you have follow-up HIV testing:

- 4-6 weeks after your first visit Date: _____
- 4 months after first visit Date: _____

HIV can't always be detected right away. If you have been exposed to HIV and the HIV PEP treatment doesn't work to prevent infection, it may have reduced the amount of virus in your blood. In that case, the test might not be positive right away, even if you have been infected, so a negative test doesn't necessarily mean that you don't have HIV. It's better to be absolutely sure that you are not infected – the 4-month test is to guarantee that you are free from HIV.

What is Truvada®?

Truvada® is a tablet made up of two different medications: 300 milligrams (mg) of tenofovir and 200 mg of emtricitabine. They belong to a group of anti-HIV medications called Nucleoside Reverse Transcriptase Inhibitors (NRTIs). NRTIs fight the virus by blocking a protein called ‘reverse transcriptase’ that HIV needs to make copies of itself.

How is Truvada® taken?

The usual adult dose is one tablet, taken once a day with water or another non-alcoholic drink. It can be taken with or without food. Take medication at the same time every day.

The medications should be stored in a cool, dry place out of reach of children. Do not store them in your bathroom or kitchen because heat and moisture may make them less effective.

Side Effects of Truvada®

The two medications that make up Truvada® rarely cause major side effects when used for only 28 days. Possible reactions can be divided into two categories: “up-front” side effects that happen soon after you start the medications and can usually be managed with over-the-counter medications if necessary; and rare but more severe side effects.

Common Side Effects

The most common side effects of Truvada® are headaches, nausea (upset stomach) vomiting, diarrhea, and fatigue (feeling tired, weak, no energy). Other side effects include dizziness, joint pain, trouble sleeping, abnormal dreams, back pain, or change in the colour of your skin on the palms or soles of the feet.

More Severe Side Effects

These side effects rarely occur, especially in short-term (28-day) treatment but they could happen so you should know about them. You will be watched closely for each of these reactions during your follow-up visits while taking Truvada®. If any of these symptoms occur, contact your Health Care Provider:

- Mood changes such as anxiety or depression
- Tingling/numbness of hands or feet
- Loss of appetite
- Unusual weight loss
- Unusual tiredness
- Stomach/abdominal pain

Some rare, but serious side effects are:

- Bone pain
- Calcium loss from bones
- Muscle tenderness/pain/weakness
- Pink/bloody urine or change in the amount of urine

Contact your doctor if you develop a new cough, fever, trouble breathing, new vision problems, new headaches, or new skin problems as these may be signs of an infection.

A very serious allergic reaction to this medication is rare, however seek immediate medical attention if you experience rash, itching/swelling (especially of the face, tongue or throat), severe dizziness, or trouble breathing.

If you notice any other side effects that are not listed above, contact your Health Care Provider.

Does Truvada® react with other drugs?

Other medications that you take may be affected by taking Truvada® and may also make it less effective. Side effects may also be worse if you are taking several other drugs.

Tell your Health Care Provider about all medications you are already taking, and before you start any new medication (including anything you take to manage side effects). This includes the use of prescriptions, over-the-counter medications, street drugs, and herbal or natural products.

What if I have other health issues?

Before taking Truvada®, tell your nurse or doctor about any health conditions or illnesses you have been diagnosed with or think you might have, especially involving your pancreas, kidneys, liver (including hepatitis), blood problems, or osteoporosis. You may need a change in the dosage or you may need to be carefully monitored during treatment.

What if I am pregnant or breastfeeding?

Taking Truvada® in pregnancy or while breastfeeding is considered to be safe. If you are or may be pregnant, tell your nurse or doctor. For more information on Truvada®: www.truvada.com

What is Tivicay®?

Tivicay® is a tablet containing 50 mg of Dolutegravir belonging to a group of Drugs called Human Immunodeficiency Virus Integrase Strand Transfer Inhibitor. This antiviral medication helps to stop making the HIV virus multiply in your body.

How is Tivicay® taken?

The usual adult dose is one tablet each day, swallowed with water or a non-alcoholic drink.

Tivicay® can be taken either with or without food. Some people have found taking Tivicay® with food reduces the likelihood of an upset stomach. If you have trouble swallowing the tablet, ask your Health Care Provider about the possibility of liquid Tivicay®.

The medication should be stored in a cool, dry place out of reach of children. Do not store it in your bathroom or kitchen because heat and moisture may make it less effective.

Side effects of Tivicay®

Common Tivicay side effects may include: headache; sleep problems (insomnia); or changes in the shape or location of body fat (especially in your arms, legs, face, neck, breasts, and waist).

More severe side effects

These side effects are rare but they could happen. You will be watched closely for each of these during your follow-up visits while taking Tivicay®. ***If symptoms relating to any of the following side effects occur, contact your Health Care Provider:***

Pancreatitis (inflammation/swelling of the pancreas): Pancreatitis may be linked with large increases in the amount of fat (triglycerides) in your blood. The pancreas is the organ in your body that makes insulin and the enzymes which help you to digest food. If untreated, pancreatitis can cause death, so even though you will be monitored during your follow-up visits, call your doctor immediately if you have any of these symptoms between visits: *severe nausea, vomiting, and abdominal pain that may spread to your back.*

Hepatitis (liver inflammation): More likely to occur in people who already have liver disease (such as Hepatitis C), but possible for others as well. Symptoms include *loss of appetite, nausea and vomiting, abdominal pain, darkening of the urine, jaundice (yellowing of the skin and/or white part of the eye), and pale stools (bowel movements).*

With food, Tivicay can be taken with the following medications:

- antacids or laxatives that contain calcium, magnesium, or aluminum (such as Amphojel, Di-Gel Maalox, Milk of Magnesia, Mylanta, Pepcid Complete, Rolaid, Rulox, Tums, and others), or the ulcer medicine sucralfate (Carafate);
- vitamin or mineral supplements that contain calcium or iron.

Tell your Health Care Provider about all medications you are currently taking and before you start any new one. This includes herbal and naturopathic remedies, prescriptions, over-the-counter, and street drugs.

Some drugs should not be taken at all with Tivicay® and others should be taken cautiously so your Health Care Provider will review a list with you to make sure there won't be any problems. Some medications can be stopped for the duration of the treatment but others are necessary for your health and should be continued. If there is a risk of an interaction, your Health Care Provider may recommend that you take a different HIV PEP combination.

You should not use Tivicay if you are allergic to dolutegravir or if you are also taking dofetilide (Tikosyn).

What if I am taking hormonal contraceptives?

Tivicay® does not interfere with emergency contraceptives such as Plan B® or Ovral®, and it does not affect the Mirena® IUD system.

- **What if I am pregnant or breastfeeding?**

Truvada/Tivicay can be taken if you are pregnant or breastfeeding.

What if I have other health issues?

Before taking Tivicay®, tell your Health Care Provider if you have diabetes, liver problems, or hemophilia. You may not be able to take Tivicay® if you have these conditions; or, you may need a change in dosage or careful monitoring during treatment.

For more information on Tivicay®: www.Tivicay.com

