

## The HIV and sexual health charity for life

Website: [www.tht.org.uk](http://www.tht.org.uk) THT Direct: 0808 802 1221

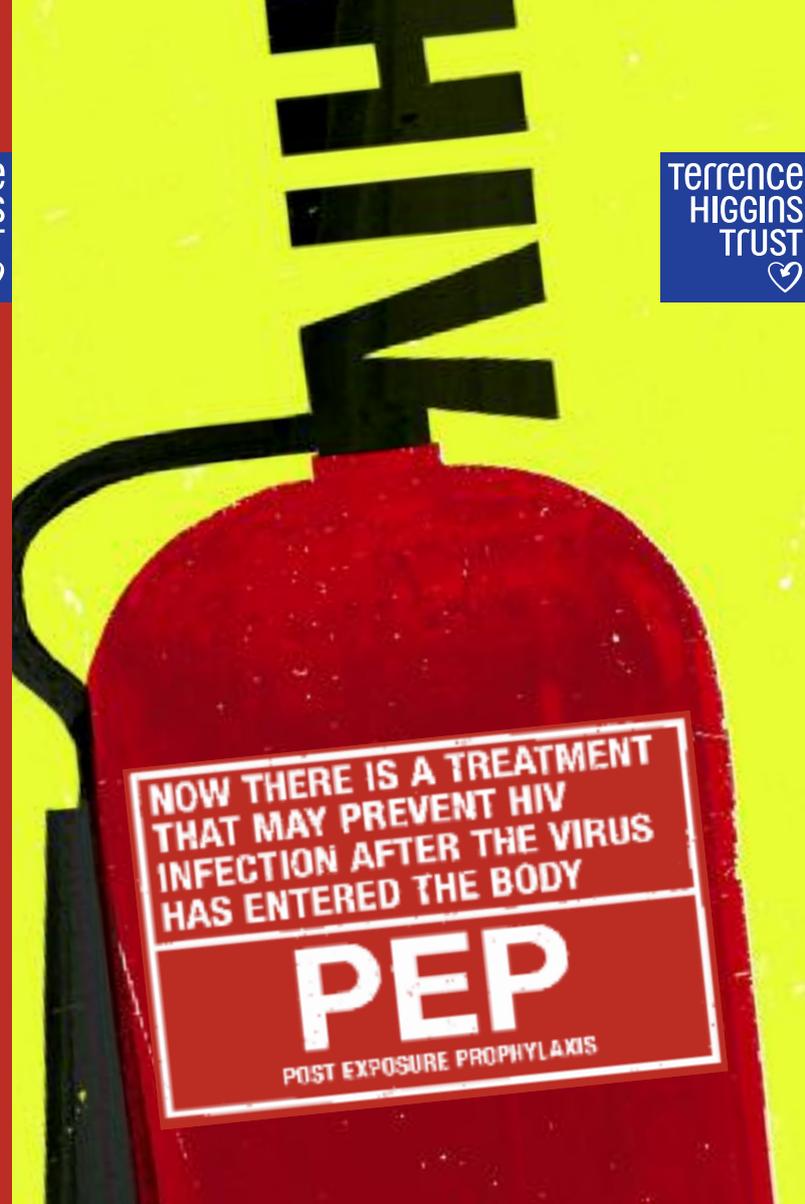
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# PEP:

- May stop you becoming infected with HIV.
- Must be started as soon as possible up to 72 hours (three days) after unprotected sex, or a condom breaking or slipping off. It is best to start PEP within 24 hours.
- Is available free from NHS sexual health clinics and hospitals.
- Involves taking anti-HIV medicines for four weeks.
- May have side effects.
- Is not guaranteed to work.



# Post

= after

# Exposure

= a situation where HIV has a chance to get into someone's bloodstream

# Prophylaxis

= a treatment to stop an infection happening

SO...

# PEP

= Post-exposure prophylaxis (PEP) is a treatment which may stop you becoming infected with HIV after it has entered your body. PEP needs to be started as soon as possible after a potential exposure to HIV. It is best to start taking PEP within 24 hours (straight away if possible) and no later than 72 hours later.

## **If I have HIV in my body, isn't it too late?**

No. After HIV gets into your bloodstream, it takes a short period of time before it permanently infects you. If you start taking PEP in time you have a chance to stop HIV taking hold in your body.

## **How does PEP work?**

PEP usually involves taking three HIV medicines (known as antiretrovirals) every day for four weeks. It is not a 'morning after' pill, which is taken just once. It is a month-long course of drugs and each dose must be taken at the right time and the course must be completed. Taking PEP correctly may stop HIV taking a permanent hold in your body.

## **Will PEP stop me becoming HIV positive?**

Taking PEP makes infection with HIV after exposure less likely, but it does not work every time. It can fail if it is not started soon enough, not taken correctly, or if you have been exposed to a strain of HIV which is resistant to certain HIV medicines. It is important to take PEP at the times and doses you have been advised to, without missing any.

## **How soon should I start PEP?**

PEP can be taken up to 72 hours (three days) after exposure to HIV, but it is best to start it as soon as possible – within 24 hours is best. The longer you wait, the less chance that it will work.

After 72 hours PEP is not usually prescribed as studies show it is unlikely to work.

## **Are the medicines the same as those taken by people with HIV?**

Yes, the PEP tablets you take will be chosen from the same 'combination therapy' medicines that are taken by HIV positive people.

## **Is PEP a cure for HIV?**

No. There is no cure for HIV. PEP can only stop HIV infecting you if it is taken within 72 hours of the virus entering your body.

Once HIV takes hold and the infection becomes permanent, HIV medicines cannot get rid of HIV from your body. This is because once the virus has infected cells and started reproducing it permanently infects you. If you are HIV positive, HIV medicines can usually suppress and control the virus in your body but they can never get rid of HIV completely.

## **Does PEP have side effects?**

Yes, it can cause diarrhoea, headaches, nausea and vomiting. Due to the side effects some people taking PEP need time off work or study. The hospital may give you other medicines such as anti-sickness tablets to reduce the side effects (which will go away after you finish the PEP treatment).

## Where do I get PEP?

The following places can prescribe PEP free of charge:

- **Sexual health clinics (on weekdays during office hours).**
- **Hospital Accident and Emergency (A&E) departments (at night, at the weekend or on public holidays).**
- **If you already have HIV, your HIV clinic may be able to help if the PEP is for someone you've had sex with.**
- **Your GP will **not** usually be able to prescribe PEP.**

If you think you have been exposed to HIV, it is best to go straight to a sexual health clinic or hospital A&E department to try to access PEP. If you cannot go immediately it is best to go within 24 hours, although you can go within 72 hours.

## 'We had unsafe sex'; 'The condom broke'; 'I shared a needle' - is it worth asking for PEP?

Yes, if you think you have been exposed to HIV it is best to see a doctor as soon as possible (within 72 hours) to find out whether you would be advised to take PEP. However, not everyone who asks for PEP will be prescribed it. The doctor treating you will carry out a risk assessment and if they think your risk of HIV infection is extremely low they may not prescribe it.

To find out your risk of getting HIV, and whether it is a good idea to ask for PEP, visit: [www.tht.org.uk/PEP](http://www.tht.org.uk/PEP)

Alternatively call THT Direct on **0808 802 1221** to find out more about PEP and where to access it.

## What are the chances I will be given PEP?

Doctors have guidelines to help them decide whether it is sensible to prescribe someone PEP. This is because the risk of getting HIV is higher with some types of sex and within some groups of people. The doctor will ask you some questions about the kind of sex you had as well as when and who it was with before deciding.

If you think you have been exposed to HIV and you had anal or vaginal sex and didn't use a condom, (or if you used a condom and it slipped off or broke) it is sensible to have a PEP assessment. In some circumstances PEP is also prescribed after oral sex or if you have shared drug-injecting equipment.

## What kinds of questions will I be asked if I ask for PEP?

You will be asked about:

- **The person you had sex with – if you know they are HIV positive the doctor will ask whether they are on HIV treatment. If someone who has HIV is on stable treatment there is a much lower chance of them passing on HIV. In this situation you may not need to take PEP.**
- **If you don't know your partner's HIV status, the doctor will want to know whether they were in a 'high risk' category. Gay or bisexual men and people from parts of the world such as Sub-Saharan Africa have higher rates of HIV compared to the general population.**
- **The type of sex you had.**
- **When you had sex.**

## What if I can't get to a place that prescribes PEP within 72 hours?

After 72 hours you won't usually be offered PEP as it is unlikely to work. If it is not possible to attend a sexual health clinic, go to a hospital A&E department as they never close. If staff tell you that they do not offer PEP or ask you to come back another day, **do not wait – ask to see the on-duty HIV doctor or find another clinic or A&E department instead.**

## If I take PEP, can my body become resistant to HIV medicines (meaning they will not work if I become HIV positive one day in the future)?

No. It's HIV, not your body, that can become resistant to HIV medicines. If PEP works it stops HIV from taking hold in your body, so there will not be a virus there to become resistant. So if you become HIV positive in the future, the fact that you took PEP in the past will not affect you or your treatment.

If you take PEP and it doesn't work (meaning that you become HIV positive) it is possible the HIV in your body could be resistant to some HIV medicines, including the ones used in PEP.

If the person you had sex with has HIV and they are resistant to certain HIV medicines, doctors will tailor your PEP treatment accordingly.

## If I take PEP does that make me immune to HIV while I'm taking it and after I stop taking it?

No it does not. PEP is not a replacement for condoms. Having unprotected sex while taking PEP can increase your chance of exposure to HIV and other sexually transmitted infections (STIs).

If you remain HIV negative after taking PEP you can become infected just like any other HIV negative person.

## Now I can access PEP does it matter so much if I don't use condoms?

PEP is not a replacement for condoms – it is an emergency measure to be used as a last resort. Here are some reasons why taking PEP does not mean you should stop using condoms:

- **Using a condom is more effective at stopping HIV being passed on than PEP is.**
- **Unlike PEP, condoms do not have side effects.**
- **Condoms are only used during sex but PEP is taken daily for four weeks.**
- **Condoms are easy to get hold of but PEP can be difficult to access within a short time.**
- **You are in control of getting condoms but doctors will decide whether you should be prescribed PEP. They may say: 'No.'**
- **Unlike PEP, condoms also protect you from other STIs and unplanned pregnancies.**

## How many times can I have PEP?

If you are worried that you have been exposed to HIV you can ask for PEP – even if you have been prescribed it before. Doctors will assess you based on your circumstances each time you ask for it.

PEP involves taking powerful drugs. So if you are taking risks and relying upon PEP, you will be offered help to confidently have safer sex.

## Will I have to have an HIV test?

Yes. Before PEP can be prescribed, doctors need to find out whether you are already HIV positive. If you have HIV without knowing, PEP will not work. You will also need to have a follow-up HIV test – the clinic will advise you about future testing.

## Things to remember about PEP:

- **PEP can stop you becoming HIV positive if you are exposed to the virus.**
- **There is no guarantee that it will work.**
- **It is free of charge from NHS clinics and hospitals.**
- **It must be started as soon as possible after exposure – within 24 hours is best but it can be take up to 72 hours (three days) later.**
- **It involves taking HIV medicines for four weeks.**
- **Side effects are common but can be managed.**
- **PEP is not a substitute for condoms and should only be used as a last resort.**

# KEEP THIS BOOKLET

**You or someone you have sex with may need it one day**



For more detailed information on PEP visit  
**[www.tht.org.uk/PEP](http://www.tht.org.uk/PEP)**

Or call THT Direct on:  
**0808 802 1221**  
10am–8pm Monday–Friday.