

NEVIRAPINE

| Indication | <ul style="list-style-type: none"> • Prevention of human immunodeficiency virus (HIV) infection in newborn¹ • High risk newborn whose mother² <ul style="list-style-type: none"> ○ Has detectable viral loads at delivery ○ Is not on therapy, presents late/in labour or without testing available ○ Has HIV infection detected post-partum | | | | | | | | | | | |
|---|---|--|--|---|---|--|--|---|---------------------------------------|---------------------------|--|------------------------|
| ORAL | Presentation <ul style="list-style-type: none"> • Oral solution 50 mg/5 mL | | | | | | | | | | | |
| | Dosage (mother had no nevirapine or less than 3 days of nevirapine) <ul style="list-style-type: none"> • Dose according to gestation and weight² <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Gestational age (weeks) and weight</th> <th style="width: 30%;">Dose</th> <th style="width: 40%;">Timing of dose</th> </tr> </thead> <tbody> <tr> <td>34+6 or less AND less than 2 kg</td> <td>8 mg x 3 doses in first week of life</td> <td rowspan="2">Dose 1: within 48 hours of birth Dose 2: 48 hours after dose 1 Dose 3: 96 hours after dose 2</td> </tr> <tr> <td>34+6 or less AND 2 kg or more</td> <td>12 mg x 3 doses in first week of life</td> </tr> <tr> <td>35+0 or more</td> <td>2 mg/kg daily for 1 week THEN 4 mg/kg daily for 1 week</td> <td>Total duration 2 weeks</td> </tr> </tbody> </table> | Gestational age (weeks) and weight | Dose | Timing of dose | 34+6 or less AND less than 2 kg | 8 mg x 3 doses in first week of life | Dose 1: within 48 hours of birth Dose 2: 48 hours after dose 1 Dose 3: 96 hours after dose 2 | 34+6 or less AND 2 kg or more | 12 mg x 3 doses in first week of life | 35+0 or more | 2 mg/kg daily for 1 week THEN 4 mg/kg daily for 1 week | Total duration 2 weeks |
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| 35+0 or more | 4 mg/kg daily for 2 weeks | Total duration 2 weeks | | | | | | | | | | |
| Preparation | <ul style="list-style-type: none"> • Agitate solution gently before administration | | | | | | | | | | | |
| Administration | <ul style="list-style-type: none"> • Draw up prescribed dose • Oral/OGT/NGT without regard to feeds³ | | | | | | | | | | | |
| Special considerations | <ul style="list-style-type: none"> • Used in combination with other ART (not in isolation)⁴ • Commence 3 drug treatment as soon as possible after birth <ul style="list-style-type: none"> ○ If HIV diagnosed late, commence no later than 72 hours after birth • Discontinue if: <ul style="list-style-type: none"> ○ Abnormalities in LFT accompanied by hypersensitivity reaction ○ Significant liver function abnormalities reoccur • Suspend if: <ul style="list-style-type: none"> ○ Severe abnormalities in LFT but no hypersensitivity reaction (monitor closely) | | | | | | | | | | | |
| Monitoring | <ul style="list-style-type: none"> • LFT, renal function | | | | | | | | | | | |
| Compatibility | <ul style="list-style-type: none"> • Nil known | | | | | | | | | | | |
| Incompatibility | <ul style="list-style-type: none"> • Nil known | | | | | | | | | | | |
| Interactions | <ul style="list-style-type: none"> • Carbamazepine, fluconazole, midazolam, phenobarbital (phenobarbitone), phenytoin, sildenafil, zidovudine¹ | | | | | | | | | | | |
| Stability | <ul style="list-style-type: none"> • Store below 30 °C • Once opened, use within 6 months⁴ | | | | | | | | | | | |



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| Side effects | <ul style="list-style-type: none"> • Hypersensitivity reactions (e.g. rash, fever, arthralgia, myalgia, lymphadenopathy) • Blood pathology: eosinophilia, granulocytopenia • Digestive: potentially life-threatening hepatotoxicity including fatal fulminant hepatitis reported usually in first 6 weeks • Integumentary: rash—usually in first 6 weeks (most common side-effect) |
| Actions | <ul style="list-style-type: none"> • Antiretroviral agent • Active <i>in vitro</i> against some HIV-1 groups but has no activity against HIV-2⁴ |
| Abbreviations | ART: antiretroviral treatment; HIV: human immunodeficiency virus; LFT liver function test, OGT: oral gastric tube, NGT: nasogastric tube |
| Keywords | nevirapine, viramune, HIV, human immunodeficiency virus, anti-retroviral, ART |

The Queensland Clinical Guideline *Neonatal Medicines* is integral to and should be read in conjunction with this monograph. Refer to the disclaimer. Destroy all printed copies of this monograph after use.

References

1. British National Formulary for Children (BNFC) online. Nevirapine. [Internet]: Royal Pharmaceutical Society; August 2018 [cited 2018 September 05]. Available from: <https://www.medicinescomplete.com>.
2. Queensland Children's Hospital. Management of newborns born to women with HIV (human immunodeficiency virus) infection (CHQ-GDL-01243 v3.0). [Internet]. 2018 [cited 2019 February 20]. Available from: <https://gheps.health.qld.gov.au/childrenshealth/>.
3. IBM Micromedex®Neofax®. Nevirapine. In: IBM Micromedex® NeoFax®/Pediatrics (electronic version). IBM Watson Health, Greenwood Village, Colorado, USA. January 2019 [cited 2019 May 20]. Available from: <http://neofax.micromedexsolutions.com/neofax>.
4. MIMS Online. Nevirapine. [Internet]: MIMS Australia; July 2017 [cited 2018 September 05]. Available from: <https://www.mimsonline.com.au>.

Document history

| ID number | Effective | Review | Summary of updates |
|--------------------|------------|------------|---|
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