South Australian Neonatal Medication Guidelines

nevirapine
10mg/mL oral mixture

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Note:
This guideline provides advice of a general nature. This statewide guideline has been prepared to promote and facilitate standardisation and consistency of practice, using a multidisciplinary approach. The guideline is based on a review of published evidence and expert opinion.

Information in this statewide guideline is current at the time of publication.

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Health practitioners in the South Australian public health sector are expected to review specific details of each patient and professionally assess the applicability of the relevant guideline to that clinical situation.

If for good clinical reasons, a decision is made to depart from the guideline, the responsible clinician must document in the patient’s medical record, the decision made, by whom, and detailed reasons for the departure from the guideline.

This statewide guideline does not address all the elements of clinical practice and assumes that the individual clinicians are responsible for discussing care with consumers in an environment that is culturally appropriate and which enables respectful confidential discussion. This includes:

- The use of interpreter services where necessary,
- Advising consumers of their choice and ensuring informed consent is obtained,
- Providing care within scope of practice, meeting all legislative requirements and maintaining standards of professional conduct, and
- Documenting all care in accordance with mandatory and local requirements

Synonym
NVP

Dose and Indications

Use with zidovudine and lamivudine to provide additional prophylaxis against vertical transmission of HIV (human immunodeficiency virus) for infants of mothers with a detectable viral load at ≥ 36 weeks, or late presentation and viral load unknown.

Only to be used post consultation with Infectious Diseases team

Oral

If mother has never taken nevirapine or was taking nevirapine for < 3 days

- 2 mg/kg/dose orally, daily for 1 week
- Then 4 mg/kg/dose orally, daily for 1 week in the second week, then stop

If mother was taking nevirapine for the last 3 days or more

- 4 mg/kg/dose, daily for 2 weeks, then stop

Commence together with zidovudine and lamivudine, as soon as possible after birth within 6 to 12 hours of delivery
nevirapine
10mg/mL oral mixture

Preparation and Administration

Oral
The oral solution contains 10mg/mL nevirapine.

<table>
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<tr>
<th>Dose</th>
<th>2mg</th>
<th>4mg</th>
<th>6mg</th>
<th>8mg</th>
<th>10mg</th>
<th>12mg</th>
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<tr>
<td>Volume</td>
<td>0.2mL</td>
<td>0.4mL</td>
<td>0.6mL</td>
<td>0.8mL</td>
<td>1mL</td>
<td>1.2mL</td>
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Adverse Effects

Common
Fever, nausea, headache, diarrhoea, malaise

Infrequent
Blistering, oral lesions, conjunctivitis, facial oedema/ swelling

Monitoring
> Specific monitoring unnecessary due to short treatment course.

Practice Points
> To be used always in conjunction with zidovudine and lamivudine
> Initiate as soon as possible post delivery
> Adding nevirapine to feeds may make it more tolerable to a neonate

References

1. Management of perinatal infections, Australian Society of Infectious diseases 2014
   www.asid.net.au/documents/item/368
Document Ownership & History

Developed by: SA Maternal, Neonatal & Gynaecology Community of Practice
Contact: Health.NeoMed@sa.gov.au
Endorsed by: SA Health Safety and Quality Strategic Governance Committee
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Policy history:
Is this a new policy (V1)? N
Does this policy amend or update an existing policy? Y
If so, which version? 2.0
Does this policy replace another policy with a different title? N
If so, which policy (title)?

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