

Contraindications for Pre-Exposure Prophylaxis

PrEP **is not** indicated if **ANY** of the following applies:

- Is <12 years old
- Weighs <35 kg (77 lbs)
- Does not meet the required eCrCl cutoffs¹
- Takes *severely* contraindicated drugs²
- Has an indication for HIV post-exposure prophylaxis (PEP)³
- HIV+ or HIV unknown⁴
- High clinical suspicion for acute HIV infection⁵
- Injectable CAB (Apretude) cannot be used in those with buttock implants or fillers

Footnotes:

1. F/TDF (Truvada): eCrCl must be ≥ 60 ml/min
F/TAF (Descovy): eCrCl must be ≥ 30 ml/min
2. F/TDF (Truvada): adefovir
F/TAF (Descovy): St. John's Wort, rifampin, rifabutin, rifapentine
CAB (Apretude): rifampicin, rifapentine, carbamazepine, oxcarbazepine, phenytoin, phenobarbital
3. Substantial risk of HIV acquisition in the past 72 hours
4. Requires a negative lab-based 4th-gen HIV Ag/Ab test **OR** POC HIV Ag/Ab test (Abbott Determine).
If the patient has been on oral PrEP/PEP in the past 3 months or injectable PrEP in the past year, also needs a negative HIV-RNA test in the past week.
Oral fluid tests or HIV-Ab only POC tests are not recommended.
5. Substantial HIV-exposure event **AND** symptoms of ARS unexplained by a more likely diagnosis in the past 4 weeks