

EFAVIRENZ (Sustiva, EFV) **Combination therapy for HIV**, adults and children wt 40 kg or greater: 600 mg PO once daily on an empty stomach, preferably at bedtime. Coadministration of voriconazole in adults: Voriconazole maintenance dose of 400 mg PO two times per day with efavirenz 300 mg (use caps) PO once daily. **Peds**, age 3 mo or older and wt 3.5 to 40 kg: Consider antihistamine prophylaxis to prevent rash before starting. Give PO once daily at a dose of 100 mg for 3.5 to less than 5 kg; 150 mg for 5 to less than 7.5 kg; 200 mg for 7.5 to less than 15 kg; 250 mg for 15 to less than 20 kg; 300 mg for 20 to less than 25 kg; 350 mg for 25 to less than 32.5 kg; 400 mg for 32.5 to less than 40 kg. Take on empty stomach, preferably at bedtime. Can sprinkle capsule contents on 1 to 2 teaspoons of food with no more food for 2 h. NOTE: Pediatric HIV guideline recommends against use of efavirenz in most children under 3 yo because current doses may be inaccurate; see the guideline for details. [Generic/Trade: Caps 50, 200 mg. Tabs 600 mg.] ▶L ♀ 0/0/OR Small risk of neural tube defects; perinatal guideline allows use in all trimesters ▶—\$\$\$\$\$

ETRAVIRINE (Intence, ETR) **Combination therapy for treatment-resistant HIV**. Adults: 200 mg PO two times per day after meals. **Peds**, age 2 yo or older: Give PO two times per day after meals at a dose of 100 mg for 10 to less than 20 kg; 125 mg for 20 to less than 25 kg; 150 mg for 25 to less than 30 kg; 200 mg for 30 kg or greater. [Trade only: Tabs 25, 100, 200 mg.] ▶L ♀B ▶—\$\$\$\$\$

NEVIRAPINE (Viramune, Viramune XR, NVP) **Combination therapy for HIV**, 16 yo and older: 200 mg PO daily for 14 days initially. If tolerated, increase to 200 mg PO two times per day or Viramune XR 400 mg PO once daily. **Peds**, age 15 days or older: 150 mg/m² PO once daily for 14 days, then 150 mg/m² two times per day (max dose 200 mg two times per day). Viramune XR, age 6 yo and older: 200 mg PO once daily for BSA 0.58 to 0.83 m²; 300 mg PO once daily for BSA 0.84 to 1.16 m²; 400 mg PO once daily for BSA 1.17 m² or greater. To reduce risk of rash, give immediate-release nevirapine 150 mg/m² once daily (max 200 mg/day) for at least 14 days before conversion to Viramune XR. Patients already taking immediate-release nevirapine two times per day can switch directly to Viramune XR. Severe skin reactions and hepatotoxicity. [Generic/Trade: Tabs 200 mg. Extended-release tabs 100, 400 mg. Trade only: Susp 50 mg/5 mL (240 mL).] ▶LK ♀0/0/OR. Not recommended for initial treatment in pregnancy. ▶—\$\$\$\$\$ ■

RILPIVIRINE (Edurant, RPV) **Combination therapy of HIV infection**, treatment-naïve with HIV RNA ≤100,000 copies/mL, age 12 yo or older: 25 mg PO once daily with a meal. Dosage adjustment for rifabutin: Rilpivirine 50 mg PO once daily with a meal. [Trade only: Tabs 25 mg.] ▶L ♀0/0/OR ▶—\$\$\$\$\$

Antiviral Agents—Anti-HIV—Nucleoside/Nucleotide Reverse Transcriptase Inhibitors

ABACAVIR (Ziagen, ABC) **Combination therapy for HIV**. Adult and peds with wt 25 kg or greater: 300 mg PO two times per day or 600 mg PO daily. **Peds**: Oral soln, age 3 mo or older: 16 mg/kg (up to 600 mg/day) PO divided one or two times per day. Start with two times per day dose of oral soln; can convert to once-daily dose after 6 months of undetectable viral load and stable CD4 count. **Peds**, tabs: 150

(cont.)