

Client Information on DTG

Due to its effectiveness, the HIV treatment drug Dolutegravir (DTG) is now recommended as one of the drugs for HIV treatment regimens among eligible clients

What is Dolutegravir (DTG)?

- Dolutegravir (DTG) is an antiretroviral (ARV) drug used to treat HIV infection.
- DTG will be given as part of a fixed-dose combination commonly known as TLD:
 - o Tenofovir (TDF) +
 - Lamivudine (3TC) +
 - Dolutegravir (DTG)

What is currently known about DTG?

- ✓ DTG is a safe and effective drug for rapid viral suppression.
- ✓ DTG has **fewer side effects**, **drug interactions and is less likely to develop treatment resistance** which can stop the HIV medicines from working in the body to reduce viral load.

How will introduction of DTG based regimens affect my HIV treatment?

- The MOHCC will introduce the DTG-containing regimen in a phased approach:
 - Start: with those who are newly initiated on HIV treatment
 - Over time: clients on ART with confirmed viral suppression in the last 12 months i.e. viral load of
 <1,000 copies/ml, TND or undetectable will be transitioned to a DTG-containing regimen
- **REMEMBER**: Change in HIV treatment SHOULD ONLY be made on the advice and guidance of a qualified health professional.

What considerations are important for PLHIV before starting on a DTG-based ART regimen?

- Exposure to Dolutegravir (DTG) at the time a woman becomes pregnant (conception) may be associated
 with an increased risk of neural tube defects among infants. These are birth defects of the brain, spine, or
 spinal cord. They happen in the first month of pregnancy, often before a woman even knows that she is
 pregnant.
- DTG is not recommended for HIV-positive women who are intending to become pregnant, or pregnant women during their first trimester.
- HIV-positive adolescent girls and women capable of becoming pregnant (including those who are breastfeeding), who are <u>NOT</u> planning to become pregnant can receive the preferred regimen containing DTG. Before taking DTG adolescent girls and women of child bearing potential should:
- ✓ Receive a pregnancy test
- ✓ Be using a reliable, effective contraceptive method.











Family Planning and DTG – what should all adolescent girls and women know?

- All HIV-positive adolescent girls and women capable of becoming pregnant should be given adequate
 information and access to family planning methods to enable them to make informed choices about their
 treatment options.
- Long acting contraception methods are the most effective way to prevent unintended pregnancies.
- HIV-positive women who start on DTG, but then plan to get pregnant, should discuss with their health care
 provider about provision of alternative antiretroviral treatment before you fall pregnant.

HIV Treatment and Family Planning Options are YOUR Choice!

- Women living with HIV have strongly expressed the importance of ensuring a woman's right to make her own informed choice among ART regimen options.
- All PLHIV should receive information on all available forms of HIV treatment and family planning methods.
- Once you have received information, you should be given the choice with regard to which HIV Treatment or family planning method you want to use.



What should <u>all</u> PLHIV know once taking a DTG-containing regimen?

- Adhere to your treatment: take your ARVs at the same time every day, as advised by your health care
 provider. Do not stop taking your ART even if you are feeling well.
- Talk to your health care worker about any upcoming life events (i.e., travel, seasonal work) that might
 interfere with taking your ARVs and plan ahead to avoid any treatment interruptions.
- Your sexual partner and all children in your household should know their HIV status.
- Report side effects to your health care worker.
- Do not stop taking your ARV medicines without talking to your health care worker.
- Do not share your medicines.
- Store your ARV medicines at room temperature, in a secure, dry place. Keep all medicines out of reach from children.
- Pick-up your ARV refills before you run out of medicine.
- Ensure timely viral load monitoring and attend all scheduled clinic appointments on time set reminders and plan ahead.
- Talk to your health care worker if you have any questions about your HIV treatment or need support –
 you are not alone.