

Eviplera[®]

(tenofovir disoproxil, emtricitabine, rilpivirine)

This leaflet is designed to give you a general idea of the most important things you need to know about your new medicine. It is not supposed to replace the manufacturer's leaflet that comes with the medicine but is intended to be read alongside it. After reading this leaflet if you have any questions, please ask your clinic team.

Clinic contact details:

What is Eviplera?

Eviplera is a purplish-pink, oval-shaped tablet that is embossed with 'GSI' on one side and plain on the other side. Usually, this medicine is used on its own for the treatment of HIV. Please speak to your clinic team if you would like more information about how these drugs work.



How should I take Eviplera?

- The recommended dose is: ONE tablet ONCE a day **with a main meal** (breakfast, lunch or dinner) to ensure that it is absorbed adequately. There are no specific types or amounts of food that need to be taken with Eviplera.
- If you vomit within 4 hours take another dose with food and then take the next dose as usual. If you continue to vomit please contact your clinic.
- Please do not crush, if you have trouble swallowing this tablet please contact your clinic team.
- Please ensure you bring a supply of your HIV medicines if you are being admitted to hospital to ensure you are prescribed the correct medication and that you do not miss any doses.

What if I miss a dose?

HIV medicines work best if there is a constant amount of the medicine in your body. If you are worried about forgetting to take your medicines, speak to your clinic team.

Occasionally you may forget a dose. If this happens, please follow the guidance below and speak with your clinic as soon as possible for advice.

- If you notice of the time you usually take Eviplera, take the tablet as soon as possible with food. Then take the next dose as usual.
- If you notice 12 hours or more after the time you usually take Eviplera, then do not take the missed dose. Wait and take the next dose, with food, at your usual time.
- Never take a double dose to make up for the missed one.



What are the common side effects with Eviplera?

If you experience any side effects, and either they are troubling you or you develop any new symptoms after you start Eviplera, do not stop taking your medication, instead please contact your clinic team so they can discuss other treatment options with you and/or advise you how to stop safely.

Some examples of the most common side effects are listed below (for a full list of side effects please check the manufacturer information leaflet):



'Head' side effects: Dizziness/light headiness, headache, tiredness (fatigue), abnormal dreams, difficulty sleeping (insomnia), depression.



'Stomach' side effects: Feeling sick (nausea), vomiting, diarrhoea, bloating or wind (flatulence), indigestion, reduced appetite.



Changes in blood tests: raised cholesterol levels, changes in some of your liver tests and low white blood cell count.



Other side effects: rash, itching (pruritus), skin discolouration.

Can I take HIV medication if I am pregnant or breastfeeding?

If you become pregnant or are planning to start a family, do not stop taking your medication. Speak to your clinic so that your care can be managed appropriately. It is important you are on effective treatment to reduce the risk to your unborn child.

What medicines should I avoid with Eviplera?

It is important that you tell anyone prescribing you medication about any medicines you are taking. This includes prescribed medicines, recreational or party drugs, and/or supplements you buy over the counter. Always tell your clinic team if you are taking (note this is not an exhaustive list of medicines):

Medicine	Why this is important
Medicines that affect the stomach acid.	<p>Eviplera needs an acid environment in the stomach to be absorbed, so drugs that reduce stomach acidity can stop Eviplera from being absorbed properly.</p> <ul style="list-style-type: none"> • Antacids (e.g. Gaviscon[®]) should be taken at least 2 hours before or 4 hours after Eviplera. • Proton pump inhibitors e.g. omeprazole, lansoprazole and pantoprazole, should not be taken with Eviplera. • H2-receptor antagonists e.g. Famotidine may be an alternative to proton pump inhibitors and can be taken with Eviplera BUT must be taken ONCE daily and at least 4 hours after or 12 hours before taking Eviplera.
Rifampicin (anti-TB antibiotic)	Rifampicin can reduce the amount of Eviplera in the blood and therefore must not be used with Eviplera.
Dexamethasone (steroid)	Dexamethasone can reduce the amount of Eviplera within your body, meaning it may be less effective at suppressing the virus. An additional dose of rilpivirine may be considered to maintain sufficient levels. Please speak to your clinic team.
Antiepileptic medicines (e.g. carbamazepine, oxcarbazepine, phenobarbital and phenytoin)	Some medicines used for epilepsy can reduce the amount of Eviplera within your body, meaning it may be less effective at suppressing the virus. Please speak to your clinic team if you are prescribed these medicines.
Enzalutamide (chemotherapy)	Enzalutamide can reduce the amount of Eviplera within your body, meaning it may be less effective at suppressing the virus and so is not recommended to be taken with Eviplera. Please speak to your clinic team.
St John's Wort (herbal remedy for depression)	St John's Wort can reduce the amount of Eviplera within your body, meaning it may be less effective at suppressing the virus and so is not recommended to be taken with Eviplera.