



Types of Antiretroviral (ARV's) and Most Common ARV Treatment regimens

– Side effects –

● Lamivudine (3TC)

- Few side effects.

● Stavudine (d4T, Stavir, Zerit)

- For a short time, stomach ache, nausea, diarrhoea, and dry mouth.
- Rarely, pancreatitis (inflammation of the pancreas) and lactic acidosis (raised blood acid). Both can be fatal if left untreated. Symptoms include nausea, vomiting, stomach pains and weight loss.
- Pain, numbing or tingling of the extremities (e.g. fingers and feet) can occur on treatment with time.

● Efavirenz (Stocrin)

- On starting treatment, for a short time, dizziness, drowsiness, bad vivid dreams.
- Rarely, confusion and depression and/or skin rash.

● Nevirapine (Viramune)

- Skin rash is common. Rarely, a severe skin rash can occur that may be fatal.
- Client may develop liver problems e.g. severe hepatitis which can be fatal.

● Didanosine (ddI, Videx)

- This medicine has similar side effects to Stavudine. Also heartburn.

● Zidovudine (AZT)

- Can cause anaemia (weak blood) and this can cause tiredness and shortness of breath.
- Blood tests to check for anaemia should be taken regularly on starting treatment.

- For a short time, nausea, headaches, tiredness, diarrhoea, vomiting, abdominal pain and a strange taste in the mouth can occur.

● Ritonavir / Lapinavir (Kaletra)

- Serious side effects are rare, but it is common to have some nausea, diarrhoea, and bloating. There may be changes in body shape with time.

● Regimen 1a

3TC + d4T + Efavirenz

- This is the combination that will be used in public clinics for people who have become resistant to their first antiretroviral regimen.

● Regimen 1b

3TC + d4T + Nevirapine

- This is the combination that will be used in public clinics for pregnant women or women planning a pregnancy who have not used antiretroviral therapy before.
- There may be different combinations of these antiretrovirals used in special situations.

● Regimen 2

AZT + ddI + Kaletra

- This is the combination that will be used in public clinics for people who have become resistant to their first antiretroviral regimen.

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Key principles in taking ART

There are practical suggestions that can be shared with the patient to learn and apply key principles in taking antiretroviral therapy:

- *Know your body:* The patient should be in touch with their body, and be able to differentiate between different aches, pains and sensations.
- *Open communication with your health care team:* The patient should be taught to share all experiences and symptoms that they have had – no matter how small. If the patient is literate, then they can write down the side effects and the intensity. This is critical for the health care team to make informed decisions about continued medical treatment.
- *Never stop treatment without discussion:* The patient needs to understand that they should never stop the treatment on their own, without discussing these issues with their health care team first.
- *Never change treatment without discussion:* The patient should never change their treatment regimen without discussion and consultation, and under no circumstances should they share treatment.
- *Keeping clinic visits is critical:* The patient needs to understand that they have to attend every planned clinic visit. This is important for monitoring of effectiveness and potential side effects. The patient should therefore continue to have open communication with the health care team with regards to their symptoms and adherence strategies.
- *Side effects are manageable and can be treated:* If the “adjustment period” side effects are severe, then these can’t be treated with appropriate medication (anti nausea, headache pills etc.), but these should always be discussed with the health care team.

