

National Department of Health HIV/STI program is now pleased to announce the following recommendations we have adapted following the 16th July 2021 World Health Organisation publication <https://www.who.int/publications/i/item/9789240031593> on **Consolidated guidelines on HIV prevention, testing, treatment, service delivery and monitoring: recommendations for a public health approach**:

1. Introduction of Dolutegravir (DTG) based regimen for children weighing <20kg as first line ART.
 - Introduce DTG 10mg scored dispersible tablets for use in Children Living with HIV (CLHIV) older than 4 weeks of age and weighing at least 3 kg. (Refer to table 1 and 2)
2. Amendment to advise regarding children weighing <30 kg and on a DTG based regimen for treatment of HIV/TB (drug sensitive) coinfection.
 - DTG dosage can now be adjusted so additional DTG dose can be taken 12 hours after the initial dose, which will mean DTG will be taken 12 hourly only for duration of TB treatment and must be continued up to 14 days after stopping TB treatment-constituting rifampicin. (Refer to table 3.)
3. Amendment of Post Exposure Prophylaxis (PEP) regimen for children weighing <20kg
 - ABC + 3TC + DTG or AZT + 3TC + DTG as preferred regimen. (Replacing AZT + 3TC + LPV/r or ABC + 3TC + LPV/r)

Table 1: Preferred first line for ART regimen for Adults, adolescents, and children.

Populations	Preferred 1st line regimen	Alternate first line regimen
Adults and adolescents weighing ≥30kg	TDF + 3TC + DTG	ABC + 3TC + DTG TDF + 3TC + EFV TDF + 3TC + LPV/r (Consult HIV Physician)
Children weighing <30kg	ABC + 3TC + DTG	ABC + 3TC + LPV/r

Actions to be taken as per the update of this memo:

- **Phased transition of all CLHIV on an LPV/r based regimen to a DTG based regimen in line with table 2 (on next page), whilst LPV/r is to be preserved as a second line ART.**
- **Commence all newly diagnosed children with HIV on a DTG based regimen in line with table 2 (on next page).**
- **Ensure that all CLHIV and taking DTG and a rifampicin-based TB treatment at the same time, have their DTG dose adjusted accordingly and continued for 14 days after the TB treatment has stopped. (See table 3 on next page)**

PNG has procured mainly DTG 10mg (single formulation) as new formulation highlighted in yellow

DTG 50mg (single formulation) is already in use in PNG

Table 2: Simplified dosing formulations for once-daily DTG dosing for infants and children 4 weeks of age and older.

Drug	Strength of paediatric tablet	Number of tablets or capsules by weight band once daily					Strength of adult tablet
		3 - <6kg	6 - <10kg	10 - <14kg	14 - <20kg	20 - <25kg	
DTG	Film-coated tablet 50mg	-	-	-	-	1	50mg *Children >20kg are eligible.
	Dispersible scored tablet 10mg	0.5	1.5	2	2.5	3	
	If DTG 5mg (dispersible tablet) is available, see dosing below.						
	Dispersible scored tablet 5mg	1	3	4	5	6	

Table 3: ARV drug dose adjusted for children receiving rifampicin-containing TB treatment

Drug	Strength of paediatric tablet	Number of tablets or capsules by weight band morning (AM) and evening (PM)										Strength of adult tablet	
		3 - <6kg		6 - <10kg		10 - <14kg		14 - <20kg		20 - <25kg			
		AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
DTG	Film-coated tablet 50mg	-	-	-	-	-	-	-	-	-	-	50mg *Children >20kg are eligible.	
	Dispersible scored tablet 10mg	0.5	0.5	1.5	1.5	2	2	2.5	2.5	3	3		
	If DTG 5mg (dispersible tablet) is available, see dosing below.												
	Dispersible scored tablet 5mg	1	1	3	3	4	4	5	5	6	6		

Table 4: Preferred Post Exposure Prophylaxis ART regimen for adults, adolescents, and children

Populations	Preferred regimen	Alternate regimen
Adults and adolescents weighing ≥30kg	TDF + 3TC + DTG	TDF + 3TC + LPV/r
Children weighing <30kg	ABC + 3TC + DTG	AZT + 3TC + DTG (Preferred in <10-year-old)

(Use 2019 PNG HIV guidelines to for dosage guidance for ABC/3TC duo, AZT/3TC duo and LPV/r)