

*PEP greatly reduces
your chance of HIV
infection, with up to
80% effectiveness!*



PEP

IN NOVA SCOTIA

What is PEP?

What's the difference between PrEP and PEP?

PEP stands for Post-Exposure Prophylaxis, and refers to medication that you take after possible exposure to HIV. PEP greatly reduces your chance of HIV infection, with up to 80% effectiveness when taken precisely as prescribed. However, there are many barriers to accessing PEP - PEP is considered an emergency option with a lot of gate-keeping. PEP should not be considered a replacement for other HIV prevention practices such as PrEP and safer sex and drug practices. PrEP stands for Pre-Exposure Prophylaxis, and refers to medication that you take before possible exposure to HIV.

After taking PEP, you should be tested for HIV to confirm the PEP was effective. You can be tested immediately after completing PEP and tested again 3 months after exposure as a precaution. You can also start taking PrEP immediately after finishing your PEP treatment.

Community-Based Research Centre (CBRC) promotes the health of gay men through research and intervention development. We are inclusive of bisexual and queer men (cis and trans) and Two Spirit people.
www.cbrc.net

Sexual Health Nova Scotia (SHNS) represents the provincial network of community-based sexual health centres. We work together to champion positive sexual health throughout the lifespan for all in Nova Scotia.
<https://shns.ca/>

 **cbrc**
Community-Based Research Centre





Who should consider taking PEP?

An HIV-negative person who thinks they may have been exposed to HIV within the last 72 hours should consider taking PEP. Possible methods of exposure include unprotected sex, a condom breaking during sex, sexual assault, or sharing needles used to inject drugs.

In general, you do not need to consider PEP after every unprotected sexual encounter. At the emergency room, PEP may not be recommended if a person's risk of getting HIV is low (i.e. for low-risk exposure or if it is unlikely the contact person is HIV positive). Your healthcare provider will determine, through an interview, if PEP is necessary in your case. PEP is not intended for people with ongoing exposure to HIV. For people with regular high-risk behaviours, PrEP should be considered to prevent HIV instead

You do not need to consider PEP after every unprotected sexual encounter.



When do I get PEP? How often do I take it?

You should get PEP if you believe you may have recently been exposed to HIV. This may include sex with someone whose HIV status is unknown, a broken condom, sharing drug needles or other drug supplies, or sexual assault. PEP is very time-sensitive and needs to be started within 72 hours (3 days) of possible exposure. The earlier that PEP medication is taken, the better.

PEP consists of a combination of three HIV medications which you have to take consistently over 28 days.

Where do I go to get PEP? How much does it cost?

To get PEP treatment, you should visit an emergency room as soon as possible after exposure. A family doctor or walk-in clinic will not prescribe you PEP. There, you will be assessed to determine your risk of getting HIV. The healthcare provider determines if PEP is necessary.

You may be offered a 5 day "starter pack" of pills to start taking PEP right away and be given a prescription for the remainder of the full 28-day course. The cost for PEP is only covered by MSI in the case of sexual assault. Otherwise, it may be covered by some private insurance plans. Without insurance, a month-long course of PEP can cost \$900 or more.



PEP must be started within 72 hours of exposure.