

Private Bag X828, PRETORIA, 0001, Civitas Building, Pretoria

Reference: 2021/22/02/EDP/02 (supersedes reference 2020/004/07/EDP/01)

NOTICE: AVAILABILITY OF LOPINAVIR/RITONAVIR ORAL PELLETS TO CHILDREN ON ANTIRETROVIRAL TREATMENT, version 2021

The Paediatric Hospital Level Standard Treatment Guidelines (STGs) and Essential Medicines List (EML) currently recommends the use of lopinavir/ritonavir (LPV/r) as part of the first-line antiretroviral treatment regimen in children from 1 month of age¹. This was until recently only supplied as a solution (80/20mg/ml). The poor palatability of the solution may result in spitting out, vomiting or refusal of medication and thereby affect adherence to treatment. LPV/r pellets (40/10mg per capsule) are recommended for children over the age of 6 months, who cannot tolerate the LPV/r solution. In 2020, it was recommended that this formulation only be initiated by a doctor. In order to increase access to this essential medicine this restriction is now lifted; and the formulation may be initiated by nurses as well as doctors. See Table 1 below for dose recommendations according to weight:

Table 1: Dosing of LPV/r pellets according to weight

	Lopinavir/ritonavir (LPV/r) Oral Pellets Only for use in patients not tolerating LPV/r solution
arget dose	300/75 mg/m²/dose LPV/r TWICE daily
Note	Pellets 40/10 mg per capsule CAPSULES ARE NOT RECOMMENDED <6 MONTHS OF AGE
Weight	CAPSULES MUST NOT BE SWALLOWED WHOLE
3-4.9	2 capsules twice daily
5-5.9	2 capsules twice daily
6-9.9	3 capsules twice daily
10-13.9	4 capsules twice daily
14-19.9	5 capsules twice daily
20-24.9	6 capsules twice daily
25-29.9	7 capsules twice daily
≥30	10 capsules twice daily

The instructions on how to administer LPV/r pellets to children are as follows:

- Do not swallow capsule whole.
- Hold the capsule at both ends and, twisting in opposite directions, and then pull apart to pour out the pellets.
- Add the pellets (from the required number of tablets) to a spoonful of food a little at a time. For example, porridge can be used (not too hot, must be at room temperature).
- Do not stir, crush or dissolve the pellets; rather sprinkle over the food.
- Use only a small amount of food, to ensure child can consume all the pellets (never keep food with pellets in for later use). Discard food with pellets after 2 hours.
- The capsule cover can be discarded with usual waste.

Standard Treatment Guidelines and Essential Medicines List for South Africa. Hospital Level: Paediatrics, 2017 Edition NDoH notice 2021 – Availability of lopinavir/ritonavir pellets to children on antiretroviral treatment

NOTE: Once the child can swallow tablets, they should be placed on the LPV/r 100/25mg or 200/50mg tablets according to the weight-based dosing table². For recommended regimens, please refer to the 2019 ART Clinical Guidelines for the Management of HIV in Adults, Pregnancy, Adolescents, Children, Infants and Neonates, October 2019².

For further assistance on how and when to use this formulation please contact:

National HIV & TB Care Worker Hotline: 0800 212 506 or 021 406 6782

National HIV & TB Care Worker Hotline: 071 840 1572

This helpline can be contacted via SMS/Please call me/WhatsApp

Right to Care Paediatric and Adolescent HIV Helpline 082 352 6642

Right to Care Adult HIV Helpline 082 957 6698

These helplines can be contacted via call/SMS/Please call me/WhatsApp

KZN Paediatric Hotline

0800 006 603

Procurement of LPV/r pellets

Public healthcare facilities may procure LPV/r pellets (40/10mg per capsule) on quotation as a buyout item (see Annexure A: Lopimune ® 40/10mg pellets - quotation).

Provinces and Healthcare facilities are requested to distribute and communicate this information in consultation with their Pharmaceutical and Therapeutics Committees. Kindly share with all healthcare professionals and relevant stakeholders.

Comments may be submitted via e-mail:

Stock queries:

Ms Babalwa Melitafa

E-mail: Babalwa.Melitafa@health.gov.za

Clinical queries:

Essential Drugs Programme

E-mail: SAEDP@health.gov.za

The National Department of Health continues to explore other therapeutic options and formulations to improve access to antiretroviral treatment.

Kind regards

& Janasoo Tren

MS K JAMALOODIEN
DIRECTOR: AFFORDABLE MEDICINES

DATE: 23 February 2021

DR LESLEY BAMFORD

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CHIEF DIRECTOR (ACTING): CHILD,

YOUTH AND SCHOOL HEALTH

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² Available online at https://www.knowledgehub.org.za/elibrary/2019-art-clinical-quidelines-management-hiv-adults-pregnancy-adolescents-children-infants