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Lesotho

The following provides a summary of specific guidelines from the country's national guidance strategy. Use the jump links in yellow to access details on criteria for starting PEP, evaluation of risk, recommended prophylaxis, and follow-up screening recommendations by patient population. This summary can be downloaded or e-mailed to yourself or a colleague. The original country guidance document can also be downloaded.

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Suggest Updates

- [Occupational Exposure Incidents](#)
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-  [National Guidelines for HIV Treatment in Lesotho \(PDF / 2 MB\)](#)
-  [National Guidelines for ART in Lesotho \(PDF / 4 MB\)](#)
-  [National Guidelines for the Prevention of Mother to Child Transmission of HIV in Lesotho \(PDF / 1 MB\)](#)
-  [Tuberculosis Policy and Manual in Lesotho \(PDF / 8 MB\)](#)

Occupational Exposure Incidents

Year Issued:

2014

Criteria for Starting PEP:

≤ 72 hrs since exposure

Source patient known to be HIV positive: PEP recommended

Source patient of unknown HIV status: Case-by-case determination

Evaluation of Risk:

Negligible risk for HIV exposure

Exposure of vagina, rectum, eye, mouth, or other mucous membrane, intact or non intact skin, or percutaneous. Contact with urine, nasal secretions, saliva, sweat, or tears if not visibly contaminated with blood. Regardless of the known or suspected HIV status of the source.

Substantial exposure risk

Exposure of vagina, rectum, eye, mouth, or other mucous membrane, non intact skin, or percutaneous. Contact with blood, semen, vaginal secretions, breast milk, or any body fluid that is visibly contaminated with blood when the source is known to be HIV infected.

Recommended Prophylaxis:

Negligible risk for HIV exposure:

Intact skin

HIV status of source patient:

Unknown, Positive or High Risk: No PEP

Substantial exposure risk:

Mucosal splash/non intact skin

HIV status of source patient:

- Unknown: Consider 2-drug regimen
- Positive: Recommend 2-drug regimen
- High risk: Recommend 2-drug regimen Zidovudine (AZT) Lamivudine 12 hourly. Duration: 28 days

Percutaneous (sharps)

HIV status of source patient:

- Unknown: Recommend 2-drug regimen Zidovudine (AZT) Lamivudine 12 hourly. Duration: 28 days
- Positive: Recommend 2-drug regimen Zidovudine (AZT) Lamivudine 12 hourly. Duration: 28 days
- High risk: Recommend 3-drug regimen Zidovudine (AZT) Lamivudine Lopinavir/ritonavir (3rd drug) 12 hourly. Duration: 28 days

Percutaneous (needle in vessel or deep injury)

HIV status of source patient:

- Unknown: Recommend 2-drug regimen Zidovudine (AZT) Lamivudine 12 hourly. Duration: 28 days
- Positive: Recommend 3-drug regimen Zidovudine (AZT) Lamivudine Lopinavir/ritonavir (3rd drug) 12 hourly. Duration: 28 days
- High risk: Recommend 3-drug regimen Zidovudine (AZT) Lamivudine Lopinavir/ritonavir (3rd drug) 12 hourly. Duration: 28 days

Follow-up Screening Recommendations:

HIV Testing, Pregnancy, Hepatitis B at baseline

HIV Testing at 6 weeks, 3 months, 6 months

In Accordance with WHO 2014 PEP Recommendations?:

Y (but drug regimen may differ from WHO recommendation)

Sexual Assault Survivors

Year Issued:

2014

Recommended Prophylaxis:

Exposures from sexual assault, consensual sex, condom breakage also need:

- Screening and prophylaxis for other sexually transmitted infections
- Assess need for emergency hormonal contraception

Provide prophylaxis or treatment for STIs.

Offer emergency contraception for any woman who may become pregnant.

Offer psychosocial support and counseling.

Do not deny or delay PEP if a patient does not have a Sexual Assault Form (police form) or intention to pursue legal action.

Follow-up Screening Recommendations:

Baseline: HIV Testing, Pregnancy, Hepatitis B

6 weeks, 3 months, 6 months: HIV Testing

In Accordance with WHO 2014 PEP Recommendations?:

Y (but drug regimen may differ from WHO recommendation)

Children

Year Issued:

2014

Recommended Prophylaxis:

- PEP should be offered, using pediatric dosing of ARVs.
- Offer psychosocial support and counseling for assault victims.
- Provide prophylaxis or treatment for STIs as needed
- Offer emergency contraception for all pubertal girls – Tanner Stage 3 and above

Follow-up Screening Recommendations:

Baseline: HIV Testing, Pregnancy, Hepatitis B

6 weeks, 3 months, 6 months: HIV Testing

In Accordance with WHO 2014 PEP Recommendations?:

Y (but drug regimen may differ from WHO recommendation)

Source URL: <https://aidsfree.usaid.gov/resources/guidance-data/pep/lesotho>