

MEDICATION GUIDE

Nevirapine Tablets, USP

Read this Medication Guide before you start taking Nevirapine and each time you get a refill. There may be new information. This information does not take the place of talking to your doctor about your medical condition or treatment.

What is the most important information I should know about Nevirapine?

Nevirapine can cause serious side effects. These include severe liver and skin problems that can cause death. These problems can happen at any time during treatment, but your risk is highest during the first 18 weeks of treatment.

1. Severe liver problems: Anyone who takes Nevirapine may get severe liver problems. In some cases these liver problems can lead to liver failure and the need for a liver transplant, or death.

People who have a higher CD4⁺ cell count when they begin Nevirapine treatment have a higher risk of liver problems, especially:

- Women with CD4⁺ counts higher than 250 cells/mm³. This group has the highest risk.
- Men with CD4⁺ counts higher than 400 cells/mm³.

If you are a woman with CD4⁺ counts higher than 250 cells/mm³ or a man with CD4⁺ counts higher than 400 cells/mm³, you and your doctor will decide whether starting Nevirapine is right for you.

In general, women have a higher risk of liver problems compared to men.

People who have abnormal liver test results before starting Nevirapine treatment and people with hepatitis B or C also have a greater chance of getting liver problems.

You may get a rash if you have liver problems.

Stop taking Nevirapine and call your doctor right away if you have any of the following symptoms of liver problems:

- dark (tea colored) urine
- nausea (feeling sick to your stomach)
- yellowing of your skin or whites of your eyes
- feel unwell or like you have the flu
- light-colored bowel movements (stools)

- pain or tenderness on your right side below your ribs
- fever
- tiredness
- loss of appetite

Your doctor should see you and do blood tests often to check your liver function during the first 18 weeks of treatment with Nevirapine. You should continue to have your liver checked regularly during your treatment with Nevirapine. It is important for you to keep all of your doctor appointments.

2. Severe rash and skin reactions: Skin rash is the most common side effect of Nevirapine. Most rashes happen in the first 6 weeks of taking Nevirapine. **Rashes and skin reactions may be severe, life-threatening, and in some people, may lead to death. Stop using Nevirapine and call your doctor right away if you get a rash with any of the following symptoms:**

- blisters
- swelling of your face
- mouth sores
- fever
- red or inflamed eyes, like “pink eye” (conjunctivitis)
- feel unwell or like you have the flu
- liver problems (see symptoms of liver problems above)
- tiredness
- muscle or joint aches

If your doctor tells you to stop treatment with Nevirapine because you have had any of the serious liver or skin problems described above, you should never take Nevirapine again.

See the section "**What are the possible side effects of Nevirapine?**" for more information.

What is Nevirapine?

Nevirapine is a prescription medicine used to treat Human Immunodeficiency Virus (HIV), the virus that causes AIDS (Acquired Immune Deficiency Syndrome).

Nevirapine is a type of anti-HIV medicine called a "non-nucleoside reverse transcriptase inhibitor" (NNRTI). Nevirapine works by lowering the amount of HIV in your blood ("viral load"). **You must take Nevirapine with other anti-HIV medicines.** When you take Nevirapine with other anti-HIV medicines, Nevirapine can lower your viral load and increase the number of CD4⁺ cells ("T cells"). CD4⁺ cells are a type of immune helper cell in the blood. Nevirapine may not have these effects in every person.

Nevirapine does not cure HIV or AIDS, and it is not known if it will help you live longer with HIV. People taking Nevirapine may still get infections common in people with HIV (opportunistic infections). It is very important that you stay under the care of your doctor.

It is not known if Nevirapine lowers the chance of passing HIV to other people. Effective treatment combined with safer sex practices, may reduce the chance of passing HIV to others through sexual contact. Always practice safer sex by using a latex or polyurethane condom or other barrier method to lower the chance of sexual contact with any body fluids such as semen, vaginal secretions, or blood. Never reuse or share needles. Take your HIV medicines as prescribed.

Who should not take Nevirapine?

Tell your doctor if you have or have had liver problems. Your doctor may tell you not to take Nevirapine if you have certain liver problems.

Nevirapine is only for people diagnosed with HIV. If you have not been diagnosed as HIV positive, then do not take Nevirapine.

What should I tell my doctor before taking Nevirapine?

Before you take Nevirapine, tell your doctor if you:

- have or have had hepatitis (inflammation of your liver) or problems with your liver. See "**What is the most important information I should know about Nevirapine?**" and "**Who should not take Nevirapine?**"
- receive dialysis
- have skin problems, such as a rash
- are pregnant or plan to become pregnant. It is not known if Nevirapine will harm your unborn baby.
Pregnancy Registry: There is a pregnancy registry for women who take antiviral medicines during pregnancy. The purpose of the registry is to collect information about the health of you and your baby. Talk to your doctor about how you can take part in this registry.
- are breast-feeding or plan to breast-feed. Nevirapine can pass into your breast milk and may harm your baby. It is also recommended that HIV-positive women should not breast-feed their babies. Do not breast-feed during treatment with Nevirapine. Talk to your doctor about the best way to feed your baby.

Tell your doctor and pharmacist about all the medicines you take, including prescription and non-prescription medicines, vitamins and herbal supplements. Nevirapine may affect the way other medicines work, and other medicines may

affect how Nevirapine works.

You should not take Nevirapine if you also take:

- St. John's Wort. St. John's Wort can lower the amount of Nevirapine in your body.
- efavirenz (Sustiva®, Atripla®). Efavirenz may cause you to have an increased chance of side effects.
- atazanavir (Reyataz®)
- lopinavir and ritonavir (Kaletra®)
- fosamprenavir calcium (Lexiva®)
- itraconazole (Sporanox®)
- ketoconazole (Nizoral®)
- rifampin (Rifadin®, Rifamate®, Rifater®)
- Birth control pills. Birth control pills taken by mouth (oral contraceptives) and other hormone types of birth control may not work to prevent pregnancy. Talk with your doctor about other types of birth control that you can use to prevent pregnancy during treatment with Nevirapine.

Also tell your doctor if you take:

- clarithromycin (Biaxin®)
- fluconazole (Diflucan®)
- indinavir sulfate (Crixivan®)
- methadone
- nelfinavir mesylate (Viracept®)
- rifabutin (Mycobutin®)
- warfarin (Coumadin®, Jantoven®)
- saquinavir mesylate (Invirase®)

If you are not sure if you take a medicine above, ask your doctor or pharmacist.

Know the medicines you take. Keep a list of them to show your doctor or pharmacist when you get a new medicine.

How should I take Nevirapine?

- Nevirapine is always taken in combination with other anti-HIV medications.
- Take Nevirapine exactly as your doctor tells you to take it. Do not change your dose unless your doctor tells you to.
- You should never take more than one form of Nevirapine at the same time. Talk to your doctor if you have any questions.
- You may take Nevirapine with or without food.
- Do not miss a dose of Nevirapine, because this could make HIV harder to treat. If you miss a dose of Nevirapine, take the missed dose as soon as you remember. If it is almost time for your next dose, do not take the missed dose, just take the next dose at your regular time. Do not take two doses at the same time.
- If you stop taking Nevirapine for more than 7 days, ask

your doctor how much to take before you start taking it again. You may need to begin taking the Nevirapine starting dose again, which is taken 1 time each day for 14 days.

Starting Nevirapine tablets:

1. Your doctor should start you with 1 dose each day to lower your chance of getting a serious rash. **It is important that you only take 1 dose of Nevirapine each day for the first 14 days.**
 - **Call your doctor right away if you get a skin rash during the first 14 days of Nevirapine treatment** and do not increase your dose to 2 times a day.
 - You should never take your starting dose for longer than 28 days. If after 28 days you are still receiving this starting dose because you have a rash, you and your doctor should talk about prescribing another HIV medicine for you instead of Nevirapine.
 - **Do not increase your dose to 2 times a day if you have a rash.**
2. Day 15, you will take 1 Nevirapine tablet two times a day.

What are the possible side effects of Nevirapine?

Nevirapine may cause serious side effects, including:

- See **"What is the most important information I should know about Nevirapine?"**
 - **Changes in your immune system (Immune Reconstitution Syndrome)** can happen when you start taking HIV medicines. Your immune system may get stronger and begin to fight infections that have been hidden in your body for a long time. Tell your doctor if you start having new symptoms after starting your HIV medicine.
 - **Changes in body fat** can happen in some people who take antiretroviral therapy. These changes may include increased amount of fat in the upper back and neck ("buffalo hump"), breast, and around the middle of your body (trunk). Loss of fat from your legs, arms, and face can also happen. The cause and long-term health effects of these problems are not known at this time.

The most common side effect of Nevirapine is rash.

Tell your doctor if you have any side effect that bothers you or that does not go away.

These are not all the possible side effects of Nevirapine. For more information, ask your doctor or pharmacist.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

How should I store Nevirapine?

- Store Nevirapine at **59°F to 86°F (15°C to 30°C)**
- Throw away Nevirapine that is no longer needed or out-of-date.

Keep Nevirapine and all medicines out of the reach of children.

General information about Nevirapine.

Medicines are sometimes prescribed for purposes other than those listed in a Medication Guide. Do not use Nevirapine for a condition for which it was not prescribed. Do not give Nevirapine to other people, even if they have the same condition you have. It may harm them.

This Medication Guide summarizes the most important information about Nevirapine. If you would like more information, talk with your doctor. You can ask your pharmacist or doctor for information about Nevirapine that is written for health professionals.

For more information, call Breckenridge Pharmaceutical, Inc., at **1-(800)-367-3395**.

What are the ingredients in Nevirapine Tablets, USP?

Active ingredient: nevirapine
Inactive ingredients: microcrystalline cellulose, lactose monohydrate, povidone, sodium starch glycolate, colloidal silicon dioxide, and magnesium stearate

This Medication Guide has been approved by the U.S. Food and Drug Administration

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