



Post Rape Treatment



Overview of RH Kit 3: Post Rape Treatment

COMPOSITION OF RH KIT 3

1 Box :

- **Essential Medicines**
- **Medical devices**
- **Treatment Guidelines**

RH KIT 3 CONTENT

Essential Medicines

Medicines	Dosage/Form	Quantity
Levonorgestrel	Tab. 1.5mg	55 packs
Azithromycin	Cap. 250 mg	220
Azithromycin	Oral susp. 200 mg/5ml – bottle 15ml	5
Cefixime	Tab. 200mg	110
Cefixime	Syrup, 100mg/5ml, bottle 30ml	10
Zidovudine + Lamivudine	Tab. 300 mg Tab. 150 mg – (2tabs/28 days)	1,800
Zidovudine	Cap. 100 mg	840
Lamivudine	Tab. 150 mg	360

RH KIT 3 CONTENT

Medical Devices

Pregnancy Test, temperature stable (25)

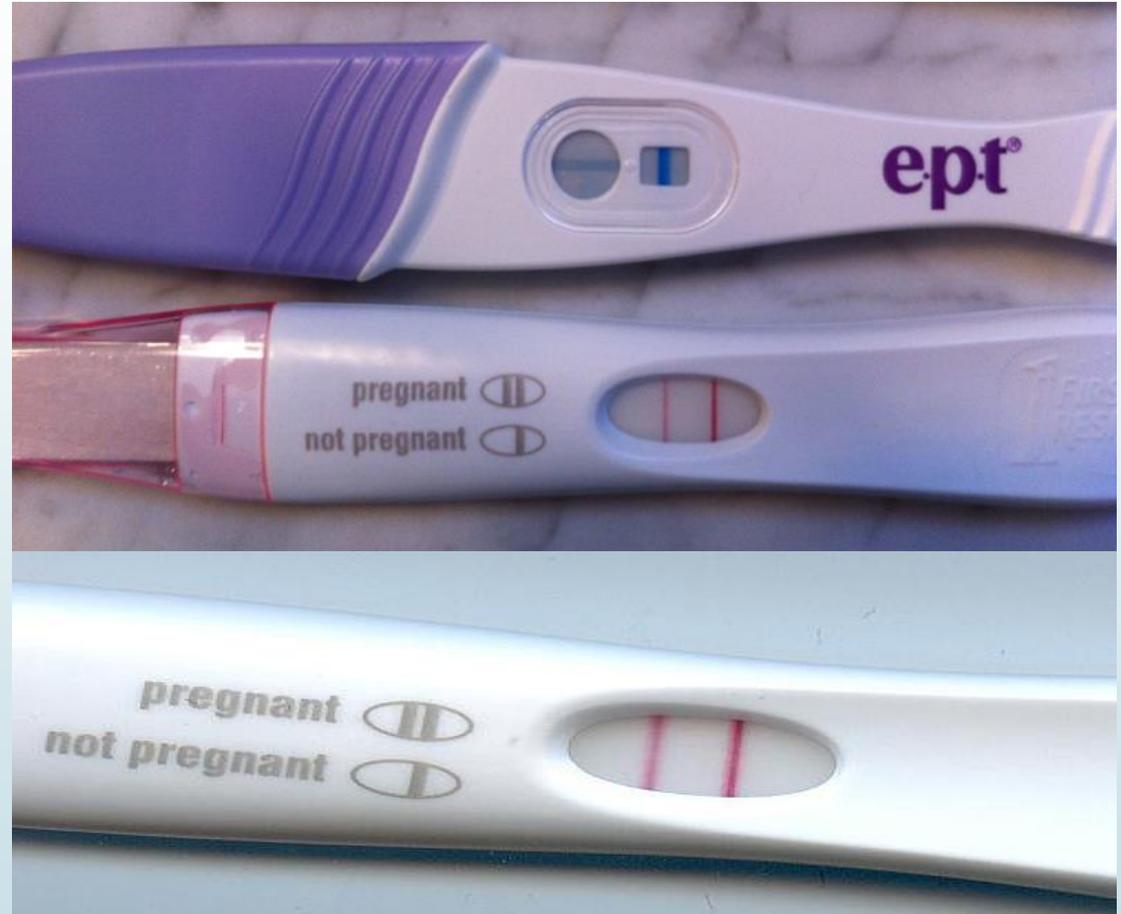
Bag (envelope), plastic, for drugs,
approximately 10 x 15 cm, pack of 100

(1)

Gloves

Swabs

Wound dressing essentials





RH KIT 3 CONTENT

Treatment Guidelines

- Post-Rape Care Checklist for Women & Men, and Children, PATH, 2010
- Clinical Management of Survivors of Rape: a guide to the development of protocols for use in refugee and internally displaced situations, Revised edition, WHO/UNHCR, 2004
- Emergency contraception patient information leaflet, to be adapted locally
- Post-exposure prophylaxis treatment protocol and patient information leaflet to be adapted locally

A decorative graphic on the left side of the slide. It features a dark grey arrow pointing right at the top, with several thin, curved lines in shades of blue and grey extending downwards and outwards from its base.

Treatment and Disease Prevention

In this section you will learn how to

- Provide appropriate preventive treatment
- Educate patient about their medical care

Treatment Principles

The sooner a survivor of sexual assault seeks medical care, the more you can provide in the way of treatment and preventive care. Your care of the patient will be different depending on how much time has passed since the assault.

- ▶ In addition to providing treatment for any physical injuries, medical care can prevent:
- ▶ unwanted pregnancy
- ▶ sexually transmitted infections, including HIV, chlamydia, and gonorrhea infections
- ▶ hepatitis B and tetanus infection



Treatment of Non-Emergent Injuries

Basic wound care:

- clean the wound
- dress the wound
- update tetanus vaccinations
- Provide comfort measures (e.g., splint fractures, pain control)

Emergency Contraceptive Pills (ECP)

Emergency Contraceptive Pills (ECP) can prevent pregnancy if given within five days after intercourse.

- Offer ECP to all female patients of reproductive age if there has been vaginal intercourse.
- Administer ECP as soon as possible, up to 120 hours after the assault.
- ECP reduce risk of pregnancy by 80 to 90%.
- There are no absolute contraindications to providing ECP.

Cont....

- ▶ Oral levonorgestrel (dedicated products called Postinor or Optinor)
 - ✓ is the most effective form of ECP
 - ✓ has the fewest side-effects
 - ✓ is given in a single dose
- ▶ Side-effects
 - ✓ usually minor, better if taken with food
 - ✓ include mild breast pain, nausea,
 - ✓ vomiting, and irregular vaginal
 - ✓ bleeding
- ▶ If patient vomits within one hour, repeat dose.



ECP Protocol

- ▶ Review local protocol for treatment regimen.
- ▶ If no dedicated product is available, several standard oral contraceptive pills can be used for the same effect. (Refer to RHRC distance learning module "Emergency Contraception for Conflict-Affected Settings")



Pregnancy Testing

A pregnancy test is not required before giving a patient ECP. If your clinic routinely tests for pregnancy, remember the following:

- ▶ A positive test result within a week of rape indicates a pre-existing pregnancy.
- ▶ If a pregnant woman takes ECP, it will neither end the pregnancy nor harm the fetus.
- ▶ A positive pregnancy test may change the choice of antibiotics or other medications used to treat sexual assault survivors.



Patient Teaching Messages

- ▶ ECP may cause mild nausea, vomiting, breast pain, or slight vaginal bleeding.
- ▶ ECP are not always effective in preventing pregnancy.
- ▶ ECP can make her period come later or earlier than expected.
- ▶ If she does not get her menstrual period within a week after it is expected, the patient should return to the clinic for a pregnancy test.
- ▶ ECP will not protect against pregnancy from future sexual intercourse.

Intrauterine Device (IUD)

A copper IUD, sometimes called intrauterine contraceptive device (IUCD), can also be used as a method of emergency contraception.

- An IUD is effective only if inserted within seven days of intercourse.
- It should be inserted by a trained health care worker.
- A negative pregnancy test is required before insertion.
- The IUD can be removed at the next menstrual period or left in place for future contraception.



Guidelines for Preventing STIs

Appropriate antibiotics can prevent common sexually transmitted infections, if given soon after the assault.

- Offer preventative medication to all survivors who have experienced vaginal or anal penetration.
- Administer as soon as possible (preferably within 72 hours of assault).
- Some antibiotics may be effective for up to two weeks after an assault.
- Know which sexually transmitted infections are common in your area.

Antibiotic Regimens for Preventing STIs

- ▶ Regimen commonly includes antibiotics against both:
 - gonorrhea infection
(e.g., ceftriaxone)
 - chlamydia infection
(e.g., azithromycin, doxycycline)
- ▶ Follow your local guidelines protocol for specific regimens.
- ▶ Some antibiotics are not safe in pregnancy. If a woman is pregnant she should be treated according to appropriate guidelines.

A decorative graphic on the left side of the slide. It features a dark blue vertical bar on the far left. A black arrow points to the right from the top of this bar. Several thin, light blue lines curve downwards and to the right from the bottom of the arrow, creating a sense of movement and flow.

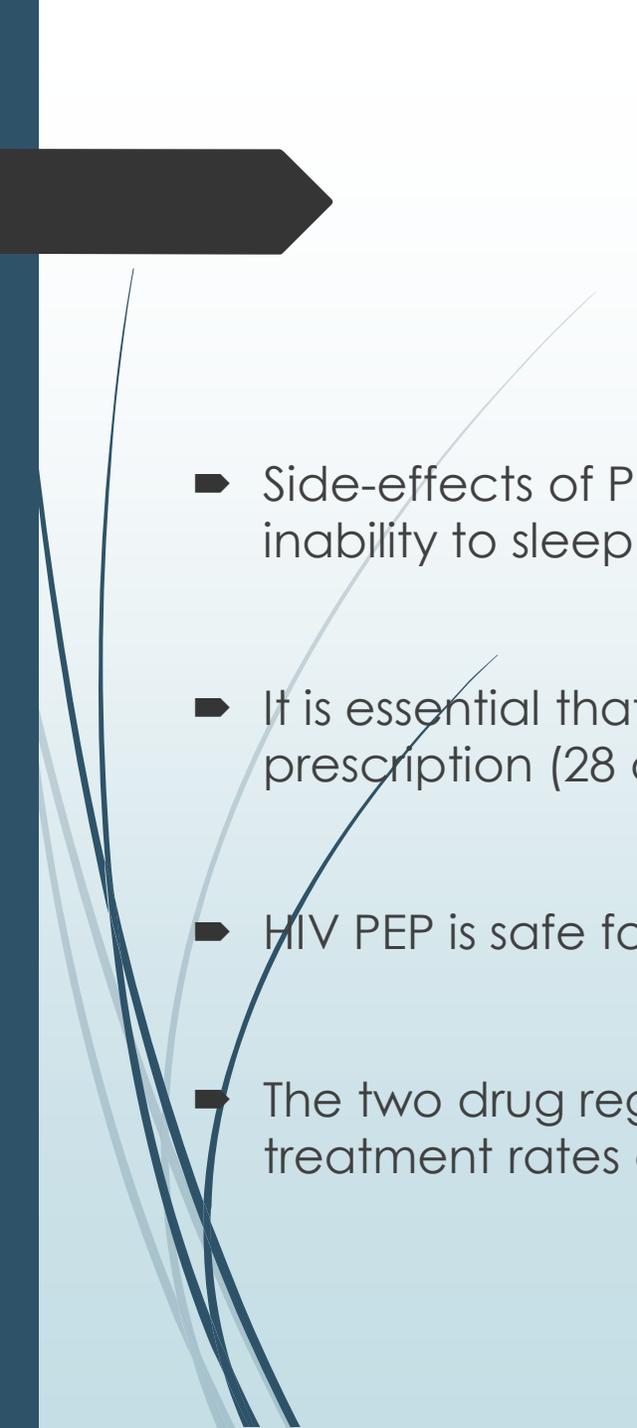
Patient Teaching Messages

- ▶ Antibiotics may not be effective in preventing all types of STIs.
- ▶ Antibiotics do not protect against infection from future sexual acts.
- ▶ STI symptoms may include anal or vaginal discharge or pain.
- ▶ If the patient develops such symptoms, she should return to the clinic immediately.

HIV Post-Exposure Prophylaxis (PEP)

HIV PEP is medication that can prevent HIV infection if given within 72 hours of exposure.

- ▶ Offer HIV PEP to patients who come to the clinic within 72 hours of:
 - sexual assault with vaginal or anal penetration
 - having their eyes, nose, mouth, or open wounds exposed to an assailant's blood or semen
- ▶ Administer HIV PEP as soon as possible.
 - To avoid delay, PEP can be started before the complete history and physical

- 
- ▶ Side-effects of PEP include mild to moderate nausea, fatigue, weakness, headache, or inability to sleep.
 - ▶ It is essential that the survivor take the PEP medication for the complete period of the prescription (28 days).
 - ▶ HIV PEP is safe for pregnant women and for children with dosage adjustment.
 - ▶ The two drug regimen (ZDV-3TC) is well-tolerated and appropriate in most countries where treatment rates are low.



HIV Testing

- ▶ HIV testing should be offered to all sexual assault survivors.
- ▶ HIV testing is not necessary before administering PEP.
- ▶ Do not withhold PEP from a survivor because she has not been tested.

Positive HIV Test

- ▶ A positive HIV test within a few weeks of sexual assault means the patient had a pre-existing HIV infection.
- ▶ A patient who tests positive for HIV should not be given PEP. It will not help someone who already has HIV.
- ▶ An HIV positive patient should be referred to appropriate medical care and counseling services.



Patient Teaching Messages

- Discuss potential benefits of HIV PEP and management of side-effects.
- Stress the importance of taking the medication for the full period.
- If the patient experiences intolerable symptoms or side-effects she should return to the clinic before stopping the medications.
- Recommend follow-up in two weeks to see how she is tolerating the medication.
- Counsel her on the need for follow-up testing.

Hepatitis B Vaccination Guidelines

- All unvaccinated or inadequately vaccinated survivors of penile vaginal or anal penetration should be offered hepatitis B vaccine.
- To prevent infection the vaccine must be given within 14 days of exposure.
- The vaccine is safe and effective in pregnant women and children.
- The only known contraindication is a serious allergic reaction to a prior dose of hepatitis B vaccine or a vaccine component.

Patient Education and Follow-Up Plan

- The patient may experience redness and tenderness at the vaccination site.
- Severe allergic reactions are very rare.
- Encourage the patient to complete the vaccination series with repeat doses at one and six months.



Preventing Tetanus Infection

- ▶ Tetanus is a serious disease caused by bacterial infection entering a wound.
- ▶ Tetanus infections result in death in 20% of cases.
- ▶ The disease is preventable through immunization.
- ▶ Adequate lifetime immunization involves five doses
 - three doses in infancy and two in childhood
- ▶ Two doses are recommended in pregnancy
- ▶ Review your local treatment protocol for specific regimen.

A decorative graphic on the left side of the slide. It features a dark blue vertical bar on the far left. A black arrow points to the right from the top of this bar. Below the arrow, several thin, curved lines in shades of blue and grey sweep across the page, creating a dynamic, abstract background element.

Tetanus Vaccination Guidelines

- ▶ Provide tetanus toxoid booster vaccination, if the patient has not had five lifetime doses or if her status is uncertain.
- ▶ If the patient has not completed a primary immunization series against tetanus infection give her a dose immediately and a follow-up dose in four weeks.



Delayed Treatment Principles

When a survivor comes to the clinic more than 72 hours after the assault the examination and treatment will depend on her condition and history. Consider the following issues:

- treatment of injuries
- pregnancy prevention
- symptomatic treatment of STIs
- HIV counseling and testing
- vaccination against hepatitis B and tetanus
- information and referrals for legal, mental health and social support services

Delayed Care Seeking

Some survivors seek care weeks or months after an assault. You may learn about an assault during a visit for another problem. Although the physical wounds may have healed, the survivor still deserves compassionate, competent, and confidential care.

Information, referrals, and emotional support can help the survivor heal and are important no matter how long it has been since the assault.

Delayed Treatment: Injuries

Provide care based on signs and symptoms:

- Treat any unhealed or infected wounds.
- Evaluate whether vaccinations are indicated.
- Incontinence of urine or stool may indicate severe complications resulting from injury, such as fistula or rectal sphincter damage. Such patients should be referred for further evaluation and care.

Delayed Treatment: Unwanted Pregnancy

- ▶ All patients should be assessed for pregnancy status.
- ▶ Be familiar with any available adoption services in your area as well as local laws regarding termination of pregnancy resulting from sexual assault.
- ▶ If a woman is pregnant as a result of the sexual assault, provide clear information about local pregnancy management options, give her emotional support and refer her to the appropriate clinical and counseling services.

Delayed Treatment: STIs

- ▶ If a patient presents with symptoms of a sexually transmitted infection, such as vaginal discharge, follow your local treatment protocol.
- ▶ All patients should be counseled and offered testing for HIV.
- ▶ HIV testing can be done as early as six weeks after an assault but should then be repeated at three to six months.

A dark blue arrow points to the right from the left edge of the slide. Below it, several thin, curved lines in shades of blue and grey sweep across the left side of the slide.

When the kit is out stock

- ▶ Use the essential medicines in the facility (antibiotics, pain killers, tetanus vaccine etc)
- ▶ Use the family planning commodities
- ▶ Link with HIV clinics or PMTCT services
- ▶ Link with mental health department for anxiety treatment if needed
- ▶ Make sure the facility have updated treatment guidelines