

# Needlestick Injuries and Prevention of HIV Infection

## A Factsheet for Patients

---

This factsheet gives information about the risk of acquiring HIV from a needlestick injury.

### HIV and AIDS

HIV is the virus that causes AIDS. HIV damages the body's immune system and makes you more likely to develop infections. Nearly everyone who is infected with HIV will develop AIDS **if they do not start antiretroviral therapy**.

An HIV positive person can transmit the infection to others by:

- Sexual intercourse
- Blood transmission
- In pregnancy via the placenta
- Through breastfeeding

HIV infection can usually be detected in the blood within 4 weeks after it is acquired, but this can take up to 12 weeks if you are given a course of post-exposure prophylaxis, or PEP medication.

It is not possible to declare you “all clear” until 12 weeks after the needlestick injury, or after you finish the course of PEP.

### What is the risk of acquiring HIV from a needlestick injury?

- If the patient has HIV and is taking treatment and the virus is controlled (i.e. undetectable in their blood), **they cannot transmit HIV**.
- The risk of acquiring HIV from a needlestick injury from someone who has HIV and not on treatment is very low - about 3 in 1,000. This means that for every 1,000 people who have a needlestick injury, only 3 get HIV.
- This is the average risk. The risk is higher if the patient has acquired HIV very recently or has HIV and is not on treatment.
- Other factors affect this risk, such as the amount of blood involved and the depth of the needlestick injury.
- Splashing of blood onto mucous membranes (e.g. the eye) or broken skin can transmit infection, but the risk is much lower than with a needlestick.
- Risk from bite injuries is hard to assess but is likely to be very low.
- Splashing of blood onto intact skin does **not** transmit HIV infection

### **What tests will be done?**

HIV blood tests will be done at 6 and 12 weeks, either after the initial injury or after finishing a course of PEP medication.

### **What should I do if I am/may be pregnant?**

- Do not attempt to become pregnant until you have been given the “all-clear”.
- If you are or think you may be pregnant, you must discuss this with the doctor who assessed you. They will probably want to discuss your treatment with an HIV specialist.

### **What to do if I need more information**

Until you have had your first follow-up appointment you should contact the Occupational Health Service or doctor who assessed you for advice or information. Once you have been seen at RIDU (Western General Hospital) or at Chalmers Sexual Health Centre, the doctor will give you information about contact numbers and other services.