Patients who warrant concomitant administration of co-trimoxazole, should be monitored closely. The concomitant administration of co-trimoxazole with high dose of co-trimoxazole, as used in the treatment of Pneumocystis carinii pneumonia, is not recommended due to the risk of drug interactions. No data are available to show that lamivudine and zidovudine have any effect on the pharmacokinetics or pharmacodynamics of co-trimoxazole. However, in cases where co-trimoxazole therapy cannot be avoided or in cases in which the likelihood of drug interactions is considered to be a matter of concern, the dose of co-trimoxazole should be reduced (see "Special Precautions").

General Precautions

Dose adjustments in patients with hepatic and renal impairment

Dosage in the elderly: zidovudine and lamivudine are eliminated mainly by renal excretion. In elderly patients, dosage adjustment is not necessary. Lamivudine is predominantly renal. Based on preliminary safety data, dosage adjustment is not necessary. Zidovudine and lamivudine have been demonstrated to cause an increase in early embryonic deaths in the rabbit (lamivudine), or rat (zidovudine). Throughout the pregnancy lamivudine should be used. Lamivudine is excreted in the breast milk of lactating rats. As there are no data available on the effect of lamivudine on human female fertility, zidovudine and lamivudine should be administered as separate preparations. The combination of zidovudine with either lamivudine or zidovudine and lamivudine should be administered as separate preparations (see "DOSE AND DIRECTIONS FOR USE"). The combinational therapy of zidovudine, lamivudine, and abacavir should be considered (see "DOSE AND DIRECTIONS FOR USE"). As there are no such data available for lamivudine, the combination of zidovudine and lamivudine, with or without abacavir, should be terminated. The combination of other antiretrovirals with abacavir should be terminated. With the concomitant use of lamivudine and abacavir together in patients with abacavir hypersensitivity, the dose of abacavir should be decreased by 50% (see "Special Precautions").

INTERACTIONS:

It is not known if lamivudine and zidovudine or any other antiretroviral therapy. Patients should therefore remain under close clinical observation. Concomitant use of these medicines should be avoided. Patients with poor bone density should be treated with concomitant use of medicines or to the wide range of other medicines used in the management of HIV disease, or are expected Benefits outweigh any potential risks of using co-trimoxazole in patients with early HIV disease. However, whether this is clinically significant is not known.

Increased plasma concentrations should be carefully monitored in patients receiving zidovudine or lamivudine. The combination of zidovudine with either lamivudine or zidovudine and lamivudine should be administered as separate preparations. In general, it is recommended that separate preparations of zidovudine and lamivudine should be used. The concomitant use of lamivudine and zidovudine should be used as separate preparations. The combination of zidovudine, lamivudine, and abacavir should be considered (see "DOSE AND DIRECTIONS FOR USE"). The combinational therapy of zidovudine, lamivudine, and abacavir should be considered (see "DOSE AND DIRECTIONS FOR USE"). As there are no such data available for lamivudine, the combination of zidovudine and lamivudine, with or without abacavir, should be terminated. The combination of other antiretrovirals with abacavir should be terminated. With the concomitant use of lamivudine and abacavir together in patients with abacavir hypersensitivity, the dose of abacavir should be decreased by 50% (see "Special Precautions").

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