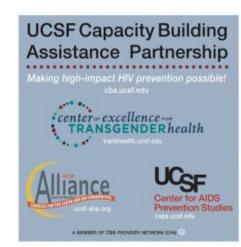
Understanding PrEP

A Webinar for Community-Based Providers

Greg Rebchook, PhD Perry Rhodes, III

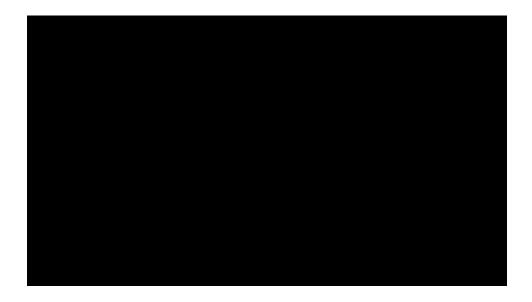


Why Do Community-Based Providers Need to Know About PrEP?

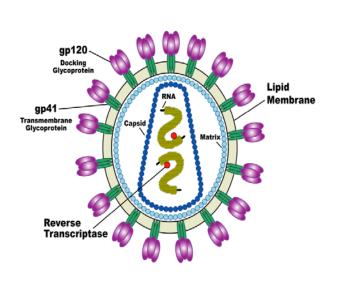
- CBO providers are on the front lines of HIV prevention
- CBO providers help clients understand their options, including: PrEP, PEP, and condoms
- These option help clients make decisions about how they want to protect themselves and their partners

- Key services to link HIVnegative people to PrEP services, include:
 - HIV testing
 - Outreach
 - Others?

What is PrEP?



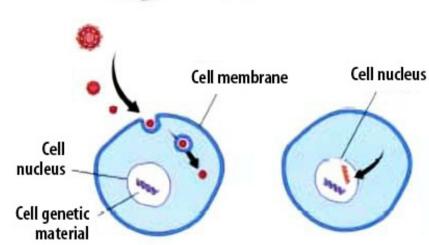
Reviewing How HIV Infection Happens



- HIV is a virus
- It invades CD4+ cells, which are a key part of our immune system
- Once HIV gets inside a CD4+ cell, it uses the cell to create more virus
- HIV destroys the original cell

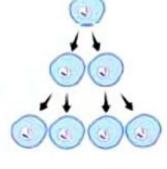
Reviewing How HIV Infection Happens



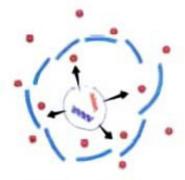


HIV invades CD4 lymphocyte

HIV inserts its genetic material into the cell's nucleus

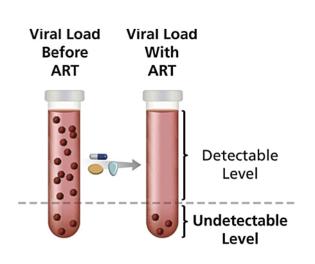


Dormant state: 1–10 years HIV reproduces as cell reproduces



HIV becomes active, destroying the cell and spreading widely

Viral Suppression as Prevention



- Maternal to Child Transmission
- Rakai Study (2000) 96% reduction of transmission between heterosexual couples
- PARTNER Study with MSM confirms this finding
- 2017 CDC declares that people living with HIV with undetectable viral load are extremely unlikely to transmit HIV sexually

What About PEP?

PEP involves taking anti-HIV drugs as soon as possible after a potential exposure



- **Post** = After
- Exposure = An HIVnegative person has gotten one of the fluids that can transmit HIV into their body from someone who is living with (or might be living with) HIV
- Prophylaxis = Prevention

PEP Facts

Exposed to HIV? The clock is ticking!



To be effective, **PEP** must begin **within 72 hours** of exposure

- PEP is a combination of HIV medications
- Works to prevent HIV from "taking hold" in the body and making more copies of itself
- Emergency medication—not for ongoing use
- Often available in Emergency Departments, person's doctor, Urgent Care, or HIV Clinics

And Now We Have PrEP



PrEP is a new prevention method in which people who do not have HIV infection take a pill daily to reduce their risk of becoming infected.

What is PrEP?

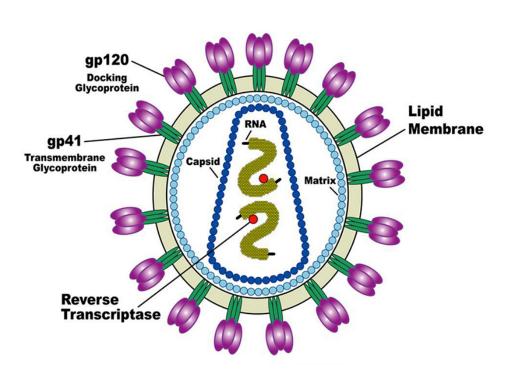
- stands for "pre-exposure prophylaxis."
- Pre = before
- Exposure = a person gets one or more of the fluids that can transmit HIV into their body
- Prophylaxis = prevention
- Unlike PEP (post-exposure prophylaxis), a person takes PrEP before they expect to be exposed to HIV

What's In PrEP?



- Made up of antiretroviral medications (ART)
- Only one drug, Truvada, FDA-approved currently
- Truvada=combination of two drugs, tenofovir (Viread) and emtricitabine (Emtriva)
- Eventually, more drugs will be developed for use as PrEP

How Does PrEP Work?



- Blocks an enzyme (called reverse transcriptase)
- HIV can't make more copies of itself inside a person's body
- When HIV can't reproduce itself, it can't take hold in a person's body
- Person stays HIVnegative, and the virus is cleared from the body

Why Does PrEP Matter?

- Highly effective (esp. for sexual transmission) for both insertive and receptive partners
- Taken in advance of HIV exposure
- If unable or unwilling to use other methods during exposure, already have significant protection
- Method of protection that receptive partners in anal and vaginal sex can control (empowering)
- Provides another option for conception in mixed-status couples



More on Why PrEP Matters



- Many people do not use condoms or fresh needles every time
- Can be used together with condoms and clean needles, for even more protection
- Reduces anxiety about sex between partners of different HIV status

PrEP Takes Some Planning

People who want to use PrEP to prevent HIV take one pill each day. It takes a while for the protection to build up in the person's system. It takes about:

7 DAYS

for PrEP to provide maximum protection in rectal tissue (which would protect the receptive partner during anal sex)

20 DAYS

for PrEP to provide maximum protection in vaginal tissue and penile tissue (which would protect the receptive and insertive partners in vaginal sex, and the insertive partner in anal sex)

20 DAYS

for PrEP to provide maximum protection to people who share injection equipment.

Everyone who uses PrEP for prevention should also take it for 28 days after an exposure occurs.

PrEP Won't Work Well If...

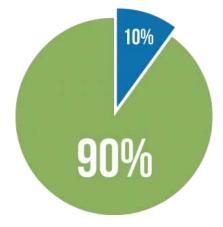
- it is something that a person takes casually
- or at the last minute
- or only after a potential exposure.
- Missing doses decreases effectiveness.

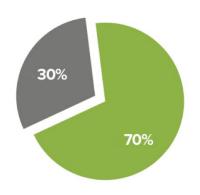
And

PrEP does NOT protect against pregnancy, or STDs other than HIV

How Effective Is PrEP?

- PrEP is highly effective at preventing HIV when it is used correctly and consistently.
- The CDC estimates that PrEP is more than 90% effective (92%) when used to protect against sexual HIV transmission, and...
- more than 70% effective when used to protect against transmission through shared injection needles.





How Effective Is PrEP?

- Some studies suggest that when PrEP is taken daily, as prescribed, it has very close to 100% effectiveness for sexual HIV prevention
- Even when PrEP is only taken 4 days a week, some studies suggest that it can provide up to 96% protection against sexual transmission of HIV
- It has been extremely rare for people who were taking PrEP as directed to become infected with HIV

How Do We Know PrEP Is Effective?

Grant RM, Lama JR, Anderson PL, et al; iPrEx Study Team. Preexposure chemoprophylaxis for HIV prevention in men who have sex with men.http://www.nejm.org/doi/full/10.1056/NEJMoa1011205 - t=article N Engl J Med 2010;363(27):2587–99.

Thigpen MC, Kebaabetswe PM, Paxton LA, et al; TDF2 Study Group. Antiretroviral preexposure prophylaxis for heterosexual HIV transmission in Botswana. N Engl J Med 2012;367(5):423–34.

Anderson P, Glidden D, Liu A, Buchbinder S, et al. Emtricitabine-tenofovir concentrations and pre-exposure prophylaxis efficacy in men who have sex with men. *Science Translational Medicine*. 2012; 4(151)151ra125. DOI: 10.1126/scitranslmed.3004006.

Baeten JM, Donnell D, Ndase P, et al; Partners PrEP Study Team. Antiretroviral prophylaxis for HIV prevention in heterosexual men and women. N Engl J Med 2012;367(5):399–410.

Choopanya K, Martin M, Suntharasamai P, et al; Bangkok Tenofovir Study Group. Antiretroviral prophylaxis for HIV infection in injecting drug users in Bangkok, Thailand (the Bangkok Tenofovir Study): a randomised, double-blind, placebo-controlled phase 3 trial. Lancet 2013;381(9883):2083–90.

Comparing PrEP and PEP

- Both use anti-HIV medications to help HIVnegative people stay HIV negative
- Medications in PEP tend to be stronger and have more side effects than those in PrEP
- PrEP is likely more effective than PEP at preventing HIV
- PrEP is for everyday prevention
- PEP is emergency medication

Transitioning from PEP to PrEP

- Steve comes in for HIV testing, with a sexual HIV exposure from yesterday
- You explain PEP to Steve, deliver his negative result, and link him to George, your agency's nurse practitioner
- George gives Steve a PEP "starter pack" immediately, and helps him make a follow-up appointment with Elizabeth, a doctor who can supervise his course of PEP over the next 28 days



- •If Steve is willing, link him to Julius, your agency's PrEP Navigator
- •While Steve is on PEP, either Elizabeth, Julius, or someone else can help him transition onto PrEP if he is at ongoing risk of contracting HIV

Barriers to PrEP

- Getting enough information about PrEP
- Knowing where to access PrEP
- Finding a way to pay for PrEP
- Talking to their medical providers who are not knowledgeable about PrEP
- Overcoming stigma and feeling supported on PrEP



What about side effects?

- Clinically important side effects (2-5%)
 - Elevated Creatinine
 - Marker of kidney function
 - Measured every 3-6 months
 - Returns to normal if Truvada is stopped
 - Bone Mineral Density (~1% reduction)
 - Most relevant for older and younger patients
 - No increase in fractures have been observed

What about side effects?

- Bothersome side effects (~10%)
 - Nausea
 - Headache
 - Diarrhea
 - Unintentional weight loss

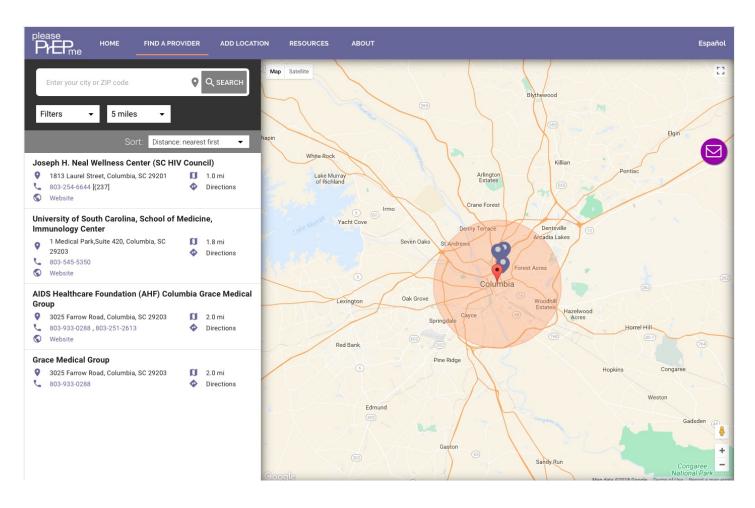
"Start-up Syndrome"

Learning More and Spreading the Word

- You and your agency are part of the key to letting people know that PrEP may be an option for them!
- These sites can help you learn more general information so that you can more comfortably talk with your clients about PrEP
- If PrEP Navigation Services are available in your area, Navigators can offer the resources to overcome many of these barriers

- prepfacts.org: http://prepfacts.org.
- Project Inform: http://www.projectinform.grg/prep/.
- **PrEP** Watch: <u>http://www.prepwatch.org</u>.
- Center for Disease Control and Prevention PrEP Page: http://www.cdc.gov/hiv/prevention/research/prep/.
- Información básica sobre la profilaxis de prexposición (PrEP). https://www.cdc.gov/hiv/spanish/basics/prep.html

Knowing Where To Access PrEP



Helping Clients Pay for PrEP

- Medicaid
- Medicare Part D
- Private Medical Insurance
- Manufacturer Assistance
 (Gilead Programs for Co-Pay
 Assistance and Medication
 Assistance)
- Patient Advocate Foundation
- Patient Access Network Foundation



Learn more at Project Inform Projectinform.org

Spreading the Word in the Medical Community

- "I'm not an HIV doctor—I'm not comfortable prescribing this."
- A variety of providers must now "get comfortable" with prescribing PrEP—anti-HIV medications for HIV-negative people
- Often, HIV docs and service providers are the link that makes the difference
- The upcoming PrEP Institute in Columbia is part of the plan to build a local network of PrEP providers

Overcoming PrEP Stigma

From medical providers:

"PrEP is only for homosexuals."

"Why do you want PrEP? You're not that promiscuous."

From other service providers:

"PrEP is just an excuse for people to stop using condoms."

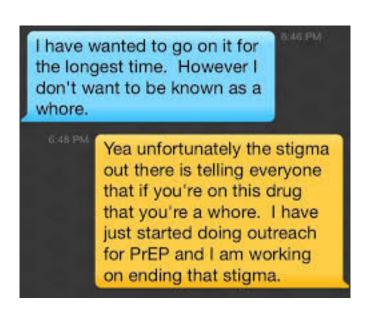
In LGBT communities:

"You must really be slutty if you are taking a pill every day to prevent HIV"

What Do You Want Your Message to Be to Clients Around PrEP?



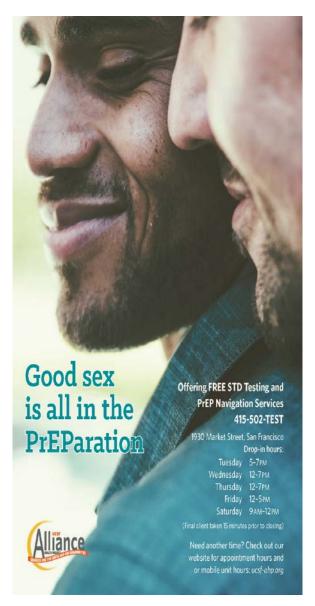
Overcoming Stigma & Supporting Clients on PrEP



- My PrEP Experience: http://myprepexp erience.blogspot.com.
- How can you and your organization help reduce PrEP-related stigma?

PrEP Program Evaluation

- 1. PrEP initiation- track time from the date of prescription to taking their first dose, some clients wait a significant amount of time.
- 2. Adherence at 3 months, 6 months
- 3. Doses missed
- 4. Any clients lost to follow up
- 5. HIV testing every 3 to 6 months
- Clients with health insurance at intake vs. Insurance assistance by the PrEP navigator
- 7. Track time spent with each client.





Client Satisfaction Survey

Examples of service categories for evaluation:

- Session time
- Referrals
- Cultural competence
- Attitudes towards adherence
- Service Satisfaction overall

Tailor agency survey to fit program individual needs in evaluation

PrEP CLIENT SATISFACTION QUESTIONNAIRE

This survey asks about your experience with our

PrEP Navigation Services.

This survey is confidential not used for marketing purposes. your opinion is important to us.

If you have any questions about this survey, please contact the Program Manager at (415) 502-7235

For Office Use Only							
Date:		_/	_				
Client ID);						

Thank you!

Thinking about the services yo	u received today, ho	w would you rate y	our satisfa	action with:		
			Very Satisfied	Somewhat Satisfied	Somewhat Dissatisfied	Very Dissatisfie
1. How satisfied were you with t	the length of you PrE	session?				
2. How satisfied were you with t	the PrEP referrals rec	eived?				
3. How satisfied were you with treceived?	the quality of PrEP se	vices you				
4. How satisfied were you with I competence?	PrEP navigator's knov	ledge and				
5. How satisfied were you with the needs and concerns?	the PrEP navigator ad	dressing your				
6. How satisfied were you with to your cultural needs?	the PrEP navigator's s	ensitivity around				
7. How satisfied were you with to coverage for PrEP. ?	the assistance you red	eived on insurance				
8. How satisfied were you that t will benefit you in making an inf	,	eceived about PrEP				
9. How satisfied are you with a operation practices?	daily pill regiment as	part of your HIV				
10. Overall, how satisfied are you TODAY?	u with the PrEP service	es you received				
11. How likely would you be to reco	mmend AHP PrEP navi	gation services to other	ers?			
☐ Very likely	☐ Somewhat likely	□ Some	ewhat unlike	ely		Very unlik
12. How much have the services y	ou've received TODAY I	nelped you to protect y	yourself fron	n HIV infectio	n?	
☐ Helped very much ☐ Hel	ped somewhat	☐ Haven't helped	l at all	☐ The	services have	made it ha



Funded by Centers for Disease Control and Prevention

Thank You!

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To access our PrEP booklet for CBOs email us at: ahptraining@ucsf.edu

