

PrEP Initiative / Iniciativa PrEx

Sponsored by NIH/NIAID/DAIDS

with co-funding by the Bill & Melinda Gates Foundation

and drug donated by Gilead Sciences



iPrEx: Global Prevention Initiative

Enrolled	2,499
HIV Test Visits	39,613
False Positives	7
Baseline Partners (median, 12 wks)	7
Follow-up Partners (median, 12 wks)	2
Syphilis Cases Dx and Rx	1,019
Condoms distributed	585,000
HBV vaccine doses given	4,533

650,000 Case Report Forms through May 1, 2010

22 stories 217 feet



Coit Tower, 180 feet, San Francisco





Fully enrolled as of December 2009







•MSM Bear a Major Burden

- -Throughout the Americas
- -In Parts of Asia

-Burden in Africa Is Increasingly Appreciated

•Efficacy Could Be Different -Possibly Different Penetration of Virus and Drug into Rectal

Tissue

•iPrEx is The Only Efficacy Study of PREP in MSM



The iPrEx Study

- High Risk MSM
- Randomized 1:1 Daily Oral PREP
- FTC/TDF vs Placebo
- Followed on Drug for:
 - HIV seroconversion
 - Adverse Events (especially renal & liver)
 - Metabolic Effects (Bone, Fat, Lipids)
 - HBV Flares among HBsAg+
 - Risk Behavior & STIs
 - Adherence
 - If infected
 - Drug Resistance
 - Viral Load
 - Immune Responses & CD4 Count



Comprehensive Prevention Services Given to All

- HIV Testing Monthly
- Pre- and Post-test counseling
- Condoms (15 or more)
- STI testing if any symptoms, monthly
- STI screening for all every 24 weeks
- Partner treatment
- PEP if recently exposed
- HBV vaccine



The primary efficacy and safety analysis is based on visits between June 2007 and May 1st 2010



CONSORT DIAGRAM

4,905 Screened





2 Infected at Enrollment

1,224 Followed for Seroconversion

Off Study During Follow -Up	199	16%
Unable to contact	87	7%
Participant relocated	51	4%
Refused further participation	41	3%
Investigator decision	11	1%
Death	1	0%
Other reasons	8	1%

FTC/TDF

8 Infected at Enrollment

1,217 Followed for Seroconversion

Off Study During Follow -Up	182	15%
Unable to contact	55	4%
Participant relocated	59	5%
Refused further participation	46	4%
Investigator decision	5	0%
Death	4	0%
Other reasons	13	1%

PLACEBO







Characteristic	FTC/TDF	PLACEBO
Education Level - no. (%) P=0.26	(n=1,251)	(n=1,248)
Less than Secondary	279 (22)	244 (20)
Complete Secondary	430 (34)	453 (36)
Post-Secondary	525 (42)	539 (43)
No Answer / Missing	17 (1)	12 (1)





Characteristic	FTC/TDF	PLACEBO
Race/Ethnicity - no. (%) P=0.40	(n=1,251)	(n=1,248)
Black/African American	117 (9)	97 (8)
White	223 (18)	208 (17)
Mixed/Other	849 (68)	878 (70)
Asian	62 (5)	65 (5)
Hispanic/Latino - no. (%) P=0.72	900 (72)	906 (73)





Characteristic	FTC/TDF	PLACEBO
Age - no. (%) P=0.04	(n=1,251)	(n=1,248)
18-24	591 (47)	662 (53)
25-29	274 (22)	241 (19)
30-39	249 (20)	224 (18)
≥40	137 (11)	121 (10)





Characteristic	FTC/TDF	PLACEBO
Number of Alcoholic Drinks (on Days when Alcohol Consumed - no. (%) P=0.40	(n=1,251)	(n=1,248)
0 (in the past month)	206 (16)	184 (15)
1-4 per day	348 (28)	345 (28)
≥ 5 per day	666 (53)	687 (55)
Refused/Missing/Don't Know	31 (2)	32 (3)



Characteristic		FTC/TDF	PLACEBO
Sexual Risk Factors at screening		(n=1,251)	(n=1,248)
Numbers of Partners last 12 weeks-mean (SD)	=0.51	18 (35)	18 (43)
Unprotected Receptive Anal Intercourse last 12 weeks - no. (%)	0.37	732 (59)	753 (60)
Unprotected Anal Intercourse with HIV+/ Unknown Status Partner last 6 months - no. (%) P=0	0.34	992 (79)	1,009 (81)
Involved in Transactional Sex last 6 months - no. (%) P=	0.84	517 (41)	510 (41)
Known HIV+ Partner last 6 months - no. (%)	0.22	23 (2)	32 (3)
History of STI last 6 months - no. (%) P=0	.36	327 (26)	307 (25)



Characteristic	FTC/TDF	PLACEBO
Sexually Transmitted Infections diagnosed at screening	(n=1,251)	(n=1,248)
Syphilis Seroreactivity (confirmed) - no. (%) P=0.95	164/1,240 (13)	162/1,239 (13)
Serum Herpes Simplex Virus Type 2 Infection - no. (%) P=0.24	458/1,241 (37)	430/1,243 (35)
Urine Leukocyte Esterase positive - no. (%) P=1.0	23 (2)	22 (2)



Characteristic	FTC/TDF	PLACEBO
Hepatitis B (HBV) Status - no (%) P=0.11	(n=1,251)	(n=1,248)
Susceptible (anti-HBs neg.anti-HBc neg. HBsAg neg)	827 (66)	803 (64)
Immune due to natural infection (anti-HBs pos, anti HBc pos)	247 (20)	222 (18)
Immune due to prior vaccination (anti-HBs pos, anti HBc neg)	149 (12)	190 (15)
Current Hepatitis B infection (HBsAg pos)	7 (1)	6 (0)





Perceived Group Assignment At Week 12 By Randomized Group



Perceived Drug Assignment	Placebo	FTC/TDF	Overall
Strongly Truvada	131 (11%)	154 (13%)	285 (12%)
Somewhat Truvada	144 (12%)	124 (11%)	268 (11%)
Don't Know	719 (61%)	710 (61%)	1429 (61%)
Somewhat Placebo	86 (7%)	79 (7%)	165 (7%)
Strongly Placebo	29 (3%)	29 (3%)	58 (3%)
Decline to State	72 (6%)	74 (6%)	146 (6%)
Total	1,181 (100%)	1,170 (100%)	2,351 (100%)

Perceived group assignment was recorded on a computer assisted structured interview at the week 12 visit. The majority of participants responded that the did not know their randomization group. The responses were evenly distributed by group (P=0.60 by Fisher exact test) indicating the integrity of the blinding

Perceived Group Assignment At Week 12 By Randomized Group



HIV Testing

39,613 visits with HIV testing

7 false positive tests in 3 people



HIV Infections

110 in total (100 incident, 10 at baseline)

At least one specimen with undetectable RNA for all incident seroconverters

Efficacy (MITT) 43.8% (15.4-62.6%) Infection Numbers: 64 – 36 = 28 averted





MITT Results

- P-value for any efficacy, p=0.005
 (two-sided, logrank)
- P-value for 30% efficacy, p=0.15
 (one-sided, logrank, stratified by site)
- No clear evidence of waning efficacy, p=0.44 for non-proportional hazards



As Treated Analysis

- Entirely pre-specified
- All visits analyzed
 - Classified as "on" or "off" treatment
- Intersects 3 streams of pill taking
 - Self report, pill counts, dispensation
- Conservative Assumptions
 - Pills in unreturned bottles taken
 - Late visits ok if enough pills
 - >50% pill use considered on treatment

As Treated Analysis

	Placebo	FTC/TDF	Overall
On Drug	47	23	70
Off Drug	17	13	30
Total	64	36	100

Efficacy = 50% 95% CI 18% to 70% P=0.006

Summary Efficacy of Oral FTC/TDF PrEP

	Efficacy	95% CI	P-Value
Intention to Treat	47%	22-64	0.001
Modified Intention to Treat	44%	15-63	0.005
As Treated (50%)	50%	18-70	0.006





Subgroup Analysis

HIV Incidence by 50% Pill Use and Group

Bars Are SE of the Incidence Estimate



HIV Incidence by 90% Pill Use and Group

Bars Are SE of the Incidence Estimate



HIV Incidence by URAI and Group

Bars Are SE of the Incidence Estimate



Summary Efficacy of Oral FTC/TDF PrEP

	Efficacy	95% CI	P Value
Intention to Treat	47%	22-64	P=0.001
Modified Intention to Treat	44%	15-63	P=0.005
As Treated (50%)	50%	18-70	P=0.006
As Treated (90%)	73%	41-88	P<0.001
Unprotected RAI at Baseline	58%	32-74	P<0.001



Sampling for Case Control Study



Drug Levels



Drug Level And Decreased Risk Ratio

- Robust because case-control study is nested in a larger cohort
- Strong Correlate of Protection
 - -Odds Ratio 12.9, P<0.001
 - -92% reduction in risk (95% CI 40-99%)
- If adjusted for URAI
 - -95% reduction in risk (95% CI 70-99%)

Plasma HIV Level



CD4+ T cell count



Drug Resistance Cases

Case	Study Arm	Study Visit	Plasma HIV RNA Level (copies/ml)	Rapid Antibody Tests	Reverse Transcriptase Nutations Conferring Resistance	FTC Resistance Phenotype (Fold Change FTC IC50)	Timing Resistance
1	Placaba	Enrollment	417	Non-reactive	M184V, T215Y,and K103N	Not done	Drimony
I Placebo	W4	111.961	Reactive	M184V, T215Y,and K103N	>300	Fillinaly	
0		Enrollment**	10,000,000	Non-reactive	Wild Type	Not done	Socondary
2 FIC/IDF	W4	3,109*	Reactive	M184V	>300	Secondary	
3 FTC/TDF	Enrollment***	48	Non-reactive	Assay Failed	Not done	Indotorminato	
	W4	<400*	Reactive	M184I	>300	indeterminate	

*Tested at week 8 after enrollment

** Symptomatic at enrollment, with fever, runny nose, and sinus tenderness, diagnosed as "sinusitis"

*** Returned for interim visit 7 days after enrollment with sore throat

Drug Resistance

	HIV Status at Enrollment					
Genotypic Resistance	Infe	cted	Uninfected			
	Placebo N=8	FTC/TDF N=2	Placebo N=64	FTC/TDF N=36		
65R	0 (0%)	0 (0%)	0 (0%)	0 (0%)		
70E	0 (0%)	0 (0%)	0 (0%)	0 (0%)		
184I	0 (0%)	1 (50%)	0 (0%)	0 (0%)		
184V	1 (13%)	1 (50%)	0 (0%)	0 (0%)		
TDF Resistance	0 (0%)	0 (0%)	0 (0%)	0 (0%)		
FTC Resistance	1 (13%)	2 (100%)	0 (0%)	0 (0%)		





Adverse events

Adverse Event	TDF/FTC		Placebo		
	n (%)	Events	n (%)	Events	Pvalue
Creatinine Elevated	25 (2%)	28	14 (1%)	15	p=0.08
Headache	56 (4%)	66	41 (3%)	55	p=0.10
Depression	43 (3%)	46	62 (5%)	63	p=0.07
Nausea	20 (2%)	22	9 (<1%)	10	p=0.04
Weight Decreased	27 (2%)	34	14 (1%)	19	p=0.04
Diarrhea	46 (4%)	49	56 (4%)	61	p=0.36
Bone Fracture	15 (1%)	16	11 (<1%)	12	p=0.41



Adverse events

	TDF/FTC		Placebo			
Adverse Event	n (%)	Events	n (%)	Events	P value	
Grade 3	110 (9%)	197	117 (9%)	225	p=065	
Grade 4	41 (3%)	51	47 (4%)	60	p=0.57	
Grade 3 or Grade 4	151 (12%)	248	164 (13%)	285	p=0.51	
Death	1 (<1%)	1	4 (<1%)	4	p=0.18	
Drug Stopped (Perm.)	25 (2%)	26	27 (2%)	33	p=0.82	
Drug Stopped (All)	79 (6%)	99	72 (6%)	92	p=0.54	
Serious AE	60 (5%)	76	67 (5%)	87	p=0.57	
AII AE	867 (69%)	2.630	877 (70%)	2,611	p=0.50	



Nausea on History



Weight Gain



Sexual Partners

High Risk Sexual Partnerships

Condom Use with High Risk Sex

Conclusions

Conclusions

Oral FTC/TDF PrEP provided additional protection against the acquisition of HIV infection among MSM receiving a comprehensive package of prevention services.

Detectable drug in blood strongly correlated with the prophylactic effect.

Sponsored by NIH/NIAID/DAIDS

with drug donated by Gilead Sciences

Premise

Risk compensation and adherence are significant determinants of PREP effects

Information about PrEP safety and efficacy could affect behavior

"Next Step" Counseling For PrEP Pill Taking

- Separation of roles
 - -Monitoring
 - -Promotion
- Monitoring is Neutral
- Promotion focus
 - -On Barriers and facilitators
 - -Blind to actual reported use

The iPrEx Study: Safety, Efficacy, Behavior, and Biology