

Disclosures

I have no financial disclosures or conflicts of interest.



Objectives:

After viewing this webinar, participants should be able to:

- Describe the need for PrEP provision in primary care settings;
- Describe the components of PrEP delivery;
- List three common reasons providers are hesitant about PrEP provision;
- List three resources providers can use to implement or enhance PrEP delivery.



<u>Pre-Exposure Prophylaxis</u> for HIV Prevention

- Currently, one pill, once daily.
 - Other dosing regimens are still in trials and not recommended in the guidelines.
- Reduces risk of HIV infection by 92-99% (Grant et al., 2010).
- Only biomedical method FDA approved currently.



Isn't this something a specialist should do?



PrEP in Primary Care: A Perfect Fit

 Primary care includes health promotion, disease prevention, health maintenance, counseling, patient education, diagnosis and treatment of acute and chronic illnesses in a variety of health care settings (e.g., office, inpatient, critical care, long-term care, home care, day care, etc.)

American Academy of Family Physicians - http://www.aafp.org/about/policies/all/primary-care.html



Health Promotion

 Health promotion is the process of enabling people to increase control over, and to improve, their health.

WHO - http://www.who.int/topics/health promotion/en/

 Utilization of PrEP requires assuming responsibility for one's individual health.



Disease Prevention

 Disease prevention focuses on prevention strategies to reduce the risk of developing chronic diseases and other morbidities

https://www.ruralhealthinfo.org/community -health/health-promotion/1/definition

PrEP is a prevention strategy to reduce the risk of HIV infection.



Health Maintenance

 Health maintenance refers to activities that preserve an individual's present state of health and that prevent disease or injury occurrence.

http://health.prenhall.com/ballpediatric/pdf/Ball_ch07.pdf

 PrEP reduces risk of HIV, thereby maintaining an individual's HIV-negative health status.



Counseling

 Counseling ... empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals.

American Counseling Association - https://www.counseling.org/aca-community/learn-about-counseling/what-is-counseling/overview

 Counseling around PrEP includes conversations about medication and appointment adherence, safer sexual behaviors, and harm-reduction.



Patient Education

 Patient education is required to enable individuals to understand the complexities of maintaining health and wellness.

 As a new addition to an individual's health routine, patient education is essential to proper PrEP use.



Diagnosis and Treatment

Diagnosis and treatment of acute and chronic conditions.

 Providers should routinely test for HIV and other STIs during PrEP initiation and follow-up.



I don't have any clients that would need PrEP.



"Hey Doc, I've been thinking about it, and I think I should get on PrEP. Can you prescribe it for me?"

Next Steps:

- 1. Determine risk for HIV infection
- 2. Determine clinical eligibility
- 3. Initiate
- 4. Maintain





"The Talk"

- Because PrEP is an option for promoting sexual health, we will need to talk about sex.
 - But 25% of MSM respondents in a survey indicated that one barrier to PrEP was feeling uncomfortable talking about sexual health with their providers

Golub, S. A., Gamarel, K. E., Rendina, H. J., Surace, A., & Lelutiu-Weinberger, C. L. (2013). From efficacy to effectiveness: facilitators and barriers to PrEP acceptability and motivations for adherence among MSM and transgender women in New York City. *AIDS patient care and STDs*, *27*(4), 248-254.

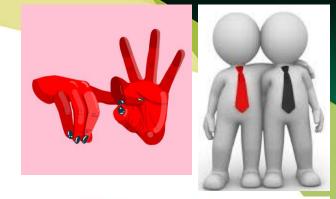


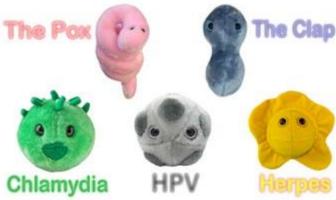
Identifying Risk – Taking a Sexual Health History

- Use the "Five P's"
 - Partners
 - Practices
 - Protection from STIs
 - Past History of STIs
 - Prevention of Pregnancy

http://www.cdc.gov/std/treatment/sexualhistory.pdf









Is PrEP Right for Me? – The Stigma Project



http://www.ispreprightforme.com/



CDC Recommended Indications for PrEP Use by MSM

- Adult man
- Without acute or established HIV infection
- Any male sex partners in past 6 months
- Not in a monogamous relationships with a recently tested, HIV-negative man
 AND at least one of the following
- Any anal sex without condoms in the past 6 months
- Any STI diagnosed or reported in past 6 months
- Is in an ongoing sexual relationship with an HIV-positive male partner http://www.cdc.gov/hiv/pdf/prepguidelines2014.pdf



CDC Recommended Indications for PrEP Use by Heterosexually Active Men and Women

- Adult person
- Without acute or established HIV infection
- Any sex with opposite-sex partners in past 6 months
- Not in a monogamous relationship with a recently tested, HIV-negative partner
 AND at least one of the following
- Is a man who has sex with both women and men
- Infrequently uses condoms during sex with 1 or more partners of unknown HIV status who are known to be at substantial risk of HIV infection
- Is in an ongoing sexual relationship with an HIV-positive partner http://www.cdc.gov/hiv/pdf/prepguidelines2014.pdf



CDC Recommended Indications for PrEP Use Injection Drug Users

- Adult person
- Without acute or established HIV infection
- Any male sex partners in past 6 months
- Any injection of drugs not prescribed by a clinician in past 6 months

AND at least one of the following

- Any sharing of injection or drug preparation equipment in past 6 months
- Been in a methadone, buprenorphine, or suboxone treatment program in past 6 months
- Risk of sexual acquisition

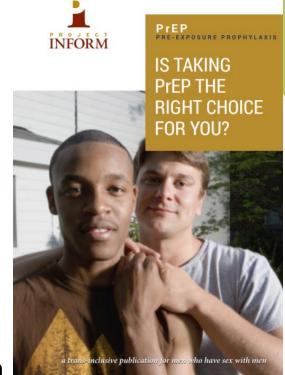
http://www.cdc.gov/hiv/pdf/prepguidelines2014.pdf



Discussing PrEP with Clients

- What is PrEP?
- Adherence
- Side Effects
- Condoms and other Safer Sex Practices
- Signs of Acute HIV Infection
 - Flu- or mono-like illness, Fever, Diarrhea





CDC Guidelines – Clinical Eligibility for PrEP

- The following are required before prescribing PrEP:
 - Documented negative HIV test result
 - No signs or symptoms of acute HIV infection
 - Normal renal function
 - No use of contraindicated medications
 - Documented HBV infection status



Complete Screening Labs and Review Medical Contraindications

- Screen for:
 - HIV (4th Gen is best if available), assess for acute HIV
 - STIs, HBV and HCV
 - Kidney dysfunction (Creatinine Clearance <60 mL/min)
 - Pregnancy (if applicable)
- Medical Contraindications
 - Documented HIV infection
 - Creatinine Clearance <60 mL/min



Prescribe and Monitor

- No more than 90 days of daily, oral TDF/FTC
- Every three months, screen for:
 - HIV, adherence issues, and STIs (among symptomatic individuals and those with recent bacterial STIs and/or multiple sex partners.
- Every six months, additionally screen for:
 - Renal function, STIs



That's a lot of information, I don't have time to deal with all of that.



Resources to Ensure Best Practices

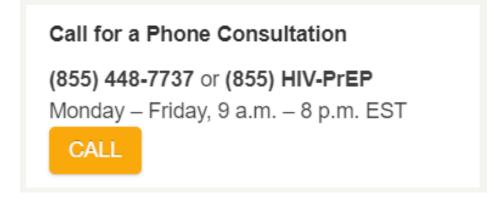
- The US Public Health Service Clinical Practice
 Guidelines on Pre-Exposure Prophylaxis for the
 Prevention of HIV Infection in the United States –
 2017 Update
 - https://www.cdc.gov/hiv/pdf/guidelines/cdc-hiv-PrEPguidelines-2017.pdf



More Resources

- National Clinician Consultation Center
 - http://nccc.ucsf.edu/clinician-consultation/prep-preexposure-prophylaxis/







Additional Learning Opportunities

- PrEParing: PrEP for Providers and Patients
 - Coursera course created by Johns Hopkins University
 - https://www.coursera.org/learn/prep

- SE AETC and other AETC live and archived webinars
 - https://www.seaetc.com/
 - https://aidsetc.org/



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