



PEP and PrEP

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https://www.paho.org/hiv-prevention-spotlight-2017/

PEP Basics

- → Post-Exposure Prophylaxis or nPEP
 - "At the point of transmission"
 - Within 72 hours of exposure (the sooner, the better)
- → Described as "morning-after pill" or Plan B for HIV
 - Effective analogy, but PEP requires taking 1-2 pills every day for at least 28 days
- → Reduces chance of seroconverting, or becoming HIV-positive. It is not 100% effective.
- → Someone who requests PEP may be asked to share details about their exposure at the clinic/urgent care/ER

PEP VIII



TAKE PEP WITHIN

★ An emergency situation

Recommended for:

- ★ Sexual assault by person(s) of unknown status
- ★ A known exposure of HIV bodily fluid contact with mucous membrane/open wound
 - Condom breaks
 - Partner discloses their status after sexual activity
 - Shared injection equipment & learned later of status of folks with whom they used

What is **PrEP**?

Pre-Exposure Prophylaxis prevents HIV.

- "Before" "contact" "prevention"
- 2 different medications currently available for use
 - Truvada
 - Approved as HIV tx in 2005; approved for PrEP in 2012
 - Descovy
 - Approved for HIV tx in 2016; approved for PrEP use in AMAB individuals in 2019



- Requires prescription renewal every 90 days
 - Prescription renewal requires negative HIV test result & sufficient kidney function
- "The pill" for HIV
 Not the same as PEP

https://fenwayhealth.org/massachusetts-prep-drug-assistance-program-now-open-statewide/

How effective is it?

99% for sexual contact

Studies show that when taken as directed, PrEP will lower someone's HIV risk through sexual transmission by 99%.

\When someone who injects drugs uses PrEP, efficacy is 75-85%.

Possible Side Effects*

- → Fatigue, nausea, GI distress
 - 10% of individuals throughout initial 2-3 weeks, symptoms will subside within 3 weeks
- → Slowing of kidney function
 - 1% reduction in speed reported in 2% of individuals
 - Reversible, will subside after discontinuation
- → Reduction in bone mineral density
 - Minimal reduction reported in less than 1% of individuals
- → HIV treatment resistance
 - Only occurs when HIV is acquired while someone is taking PrEP inconsistently



- → Initial studies indicate Descovy has very few, if any, side effects
 - For example, someone on dialysis could take Descovy
- → Descovy is currently approved for prevention among folks assigned male at birth for anal sex
 - Trials happening with folks assigned female at birth to determine efficacy





How does PrEP work?

- → Same class of medication as ART/HIV treatment medications
 - Tenofovir & emtricitabine (TDF/FTC or TAF/FTC)
 - Both are NRTI nucleotide/nucleoside reverse transcriptase inhibitor
 - HIV relies on "reverse transcriptase" to make copies of itself
- → 1 pill is taken daily, ideally at the same time each day
 - For some people, another option is PrEP Dosing On Demand
- → Must be 20 days in someone's system to provide adequate protection in vaginal tissue & the bloodstream



Takes about 7 days for adequate protection in rectal tissue



Who might be interested in PrEP?

➔ Anyone who wants PrEP!

- Someone with a sexual partner who is living with HIV
 A person who injects drugs & shares needles/works
 Someone who engages in sex work
- → Someone who has anxiety about being exposed to HIV

What PrEP services are available?

All services are available in English & Español.

PrEP Education

- Individual sessions, 20 to 30 minutes in length
- Call or text Tessa at (720) 248-8170 to schedule

PrEP Screening & Navigation

- In-person or on the phone
- Review insurance systems, financial assistance options, process for starting/staying on PrEP, & mitigation of any barriers preventing someone from accessing PrEP care
 - Direct referrals to medical clinics for care

PrEP Retention

• Plan to help client stay in PrEP care for as long as they'd like

Financial Assistance for PrEP

- ★ If someone has Medicaid, PrEP will be super low cost (less than \$10 a month).
- ★ If someone has other health insurance, and individually makes less than \$62,450 per year, PrEP will be super low cost
- ★ If someone has NO health insurance, and individually makes less than \$62,450 per year, PrEP will be super low cost.

- ★ If someone has health insurance, and makes more than \$62,450 per year, PrEP services will be at cost (based on health insurance plan), and PrEP medication will be low-cost.
- ★ If someone has NO health insurance, and individually makes more than \$62,450 per year, PrEP services will be at cost (or sliding scale), and PrEP medication can be low-cost/free through enrollment in a federal program.

Breaking the Patent



- ★ Through the work of activists and the Department of Health and Human Services, generic Tenofovir/Emtricitabine went on the market on September 30, 2020.
- ★ Teva Pharmaceutical Industries is the only company licensed to sell TDF/FTC in the USA.
 - Several pharmacies in our area are still waiting on supply as of 10/15/2020.
 - The FDA approved three other generic versions that should be available in 2021.
- ★ The Gilead co-pay coupon previously mentioned will not apply to generic. Teva offers a co-pay coupon for their generic medication.
- ★ This increase in price competition should make the price go down. We don't know yet exactly how much that will be, and what insurance companies will require of patients to get on/stay on Descovy
 - United Healthcare is planning to automatically put patients on TDF/FTC and will only approve some prior authorizations for Descovy due to cost

PrEP is an amazing tool! And...

PrEP isn't the only/correct/best tool. It's perfect for some, but PrEP doesn't fit into everyone's sexual health plan.

