DECEMBER 2015

CDC Vitalsigns™

Daily Pill Can Prevent HIV

Reaching people who could benefit from PrEP

Preexposure prophylaxis (PrEP) is a medicine taken daily that can be used to prevent getting HIV. PrEP is for people without HIV who are at very high risk for getting it from sex or injection drug use. People at high risk who should be offered PrEP include about 1 in 4 sexually active gay and bisexual men*, 1 in 5 people who inject drugs, and 1 in 200 sexually active heterosexual adults. When taken every day, PrEP is safe and highly effective in preventing HIV infection. PrEP is even more effective if it is combined with other ways to prevent new HIV infections like condom use, drug abuse treatment, and treatment for people living with HIV to reduce the chance of passing the virus to others. Many people who can benefit from PrEP aren't taking it. If more health care providers know about and prescribe PrEP, more HIV infections could be prevented.

Health care providers can:

- Test patients for HIV as a regular part of medical care. Discuss HIV risks and continued use of prevention methods, including condom use, with all patients.
- Follow the 2014 PrEP Clinical Practice Guidelines to perform recommended tests and prescribe PrEP to patients without HIV who could benefit.
- Counsel patients who can benefit from PrEP on how to take it every day and help them apply for insurance or other programs to pay for PrEP.
- Schedule appointments for patients using PrEP every 3 months for follow-up, including HIV testing and prescription refills.

*This fact sheet refers to all men who have sex with men (MSM) as gay or bisexual. Sexually active refers to people who have had sex in the past year.

90%

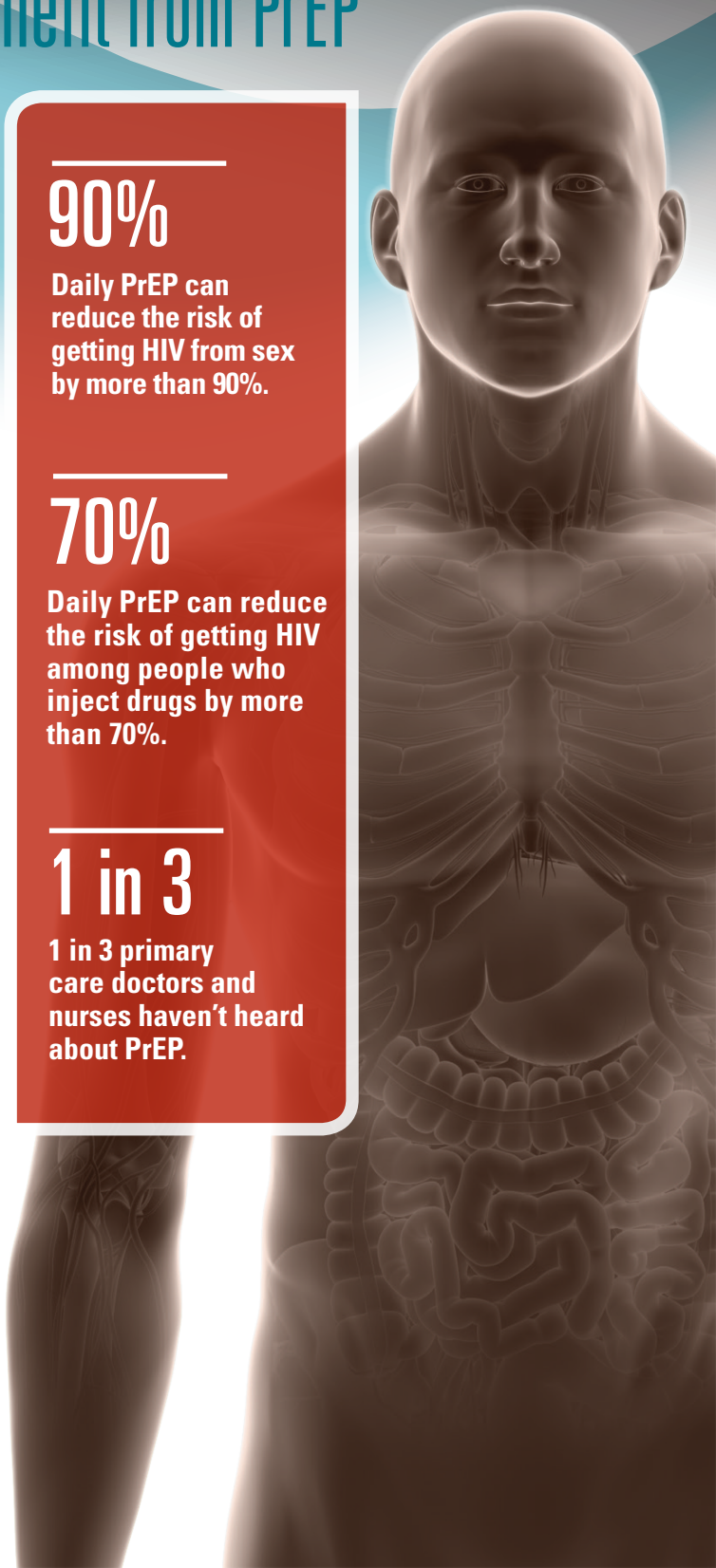
Daily PrEP can reduce the risk of getting HIV from sex by more than 90%.

70%

Daily PrEP can reduce the risk of getting HIV among people who inject drugs by more than 70%.

1 in 3

1 in 3 primary care doctors and nurses haven't heard about PrEP.



Want to learn more? www.cdc.gov/vitalsigns/HIVPrEP

Centers for Disease Control and Prevention
National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention

Problem:

Many people at very high risk for HIV infection are not getting PrEP.

PrEP is for some people at very high risk for getting HIV:

- 1 in 4 sexually active gay and bisexual adult men without HIV who:
  - Have an HIV-positive partner, or
  - Have multiple partners, a partner with multiple partners, or a partner whose HIV status is unknown and
    - Have anal sex without a condom, or
    - Recently had a sexually transmitted infection (e.g. syphilis).
- 1 in 5 adults without HIV who inject drugs who:
  - Share needles or equipment to inject drugs, or
  - Recently went to a drug treatment program (specifically, a methadone, buprenorphine, or suboxone treatment program), or
  - Are at risk for getting HIV from sex.
- 1 in 200 sexually active heterosexual adults without HIV who:
  - Have an HIV-positive partner, or
  - Have multiple partners, a partner with multiple partners, or a partner whose HIV status is unknown and
    - Do not always use a condom for sex with people who inject drugs, or
    - Are women who do not always use a condom for sex with bisexual men.

Not enough health care providers know about PrEP.

- In 2015, 34% of primary care doctors and nurses had never heard of PrEP (2015 survey).
- All prescribing health care providers can deliver PrEP care, including test for HIV, ask about sex and drug use behaviors to determine their patient's risk of getting HIV, and prescribe PrEP when indicated.

40,000

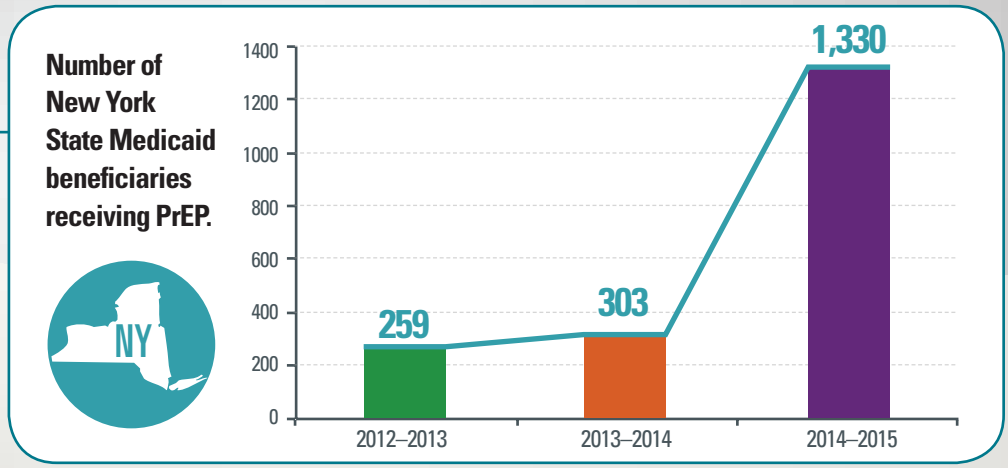
About 40,000 HIV infections are diagnosed each year in the US.

Increasing PrEP Use

A focused effort by New York State

to increase PrEP uptake started in June 2014 and included:

1. **Provider Training**
2. **Raising Awareness**
3. **Ensuring Medicaid Coverage**



SOURCE: NYS Medicaid Data Warehouse (based on Medicaid data loaded through July 2015).

Any prescribing health care provider can deliver PrEP care.

1 Test

for HIV including acute infection.

If HIV negative, ask about sex and drug use behaviors.

If HIV positive, provide or refer patient for HIV treatment and other services to maintain health and prevent further spread of HIV.

If HIV risk is low, discuss prevention methods.

If HIV risk is high, discuss risk behaviors, PrEP, and use of other prevention methods.

2 Order

recommended tests if patient is interested in PrEP and could benefit from it.

If tests show patient still benefits from taking PrEP, go to Step 3.

If tests show reason not to prescribe PrEP *(e.g. abnormal kidney function)*, discuss other prevention methods.

3 Help

patient apply for insurance or other programs to pay for PrEP.

Most public and private insurance programs cover PrEP, and patients can get help with their co-payments.

Drug assistance programs can help patients without insurance pay for PrEP.

4 Prescribe

PrEP and instruct patient to take one pill every day.

Currently Truvada®* is the only medicine approved by the FDA for PrEP.

**Tenofovir disoproxil fumarate/emtricitabine*

5 Follow-up

Schedule appointments every 3 months for follow-up, including HIV testing and prescription refills.

SOURCE: 2014 PrEP Clinical Practice Guidelines.

Have questions?

Read the full 2014 PrEP Clinical Practice Guidelines:
www.cdc.gov/hiv/pdf/PrEPguidelines2014.pdf

Call the PrEP Clinician Helpline:
(855) 448-7737
or (855) HIV-PrEP

What Can Be Done?

The Federal government is

- Increasing access to PrEP and other HIV prevention and health care services as recommended in the National HIV/AIDS Strategy for the United States. www.aids.gov/federal-resources/national-hiv-aids-strategy/overview/
- Ensuring coverage of recommended preventive services, such as HIV testing, without cost sharing in most health insurance plans.
- Educating health care providers and people at high risk about PrEP through health department programs, social marketing campaigns, and other training and technical assistance efforts.
- Helping to monitor PrEP use and its effects.

Health care providers can

- Test patients for HIV as a regular part of medical care. Discuss HIV risks and continued use of prevention methods, including condom use, with all patients.
- Follow the 2014 PrEP Clinical Practice Guidelines to perform recommended tests and prescribe PrEP to patients without HIV who could benefit.
- Counsel patients who can benefit from PrEP on how to take it every day and help them apply for insurance or other programs to pay for PrEP.
- Schedule appointments for patients using PrEP every 3 months for follow-up, including HIV testing and prescription refills.

State and local health departments and community-based organizations can

- Raise awareness about PrEP use, train health care providers, and develop policies and procedures that will increase access to PrEP.
- Monitor PrEP use among those at highest risk for HIV.
- Educate people about risky sexual and drug use behaviors and ways to reduce their risk, including PrEP and how to get it.

Everyone can

- Get tested for HIV and know their status.
- Learn how HIV is transmitted and how it can be prevented.
- Talk to their health care providers about HIV risk and ways to prevent it, including PrEP, condom use, abstinence, drug treatment, and HIV treatment for people with HIV.

Everyone taking PrEP can

- Take PrEP every day to give it the best chance to work.
- See their health care provider every 3 months for follow-up, including HIV testing and PrEP refills.
- Take other actions to further reduce HIV and STD risk.
  www.cdc.gov/hiv/basics/prevention.html

For more information, please contact
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TTY: 1-888-232-6348
www.cdc.gov
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