

Introduction

- PEP and PrEP form part of HIV combination prevention
- PEP is funded by the NHS in England and is available free of charge from sexual health clinics and A&E departments
- At present there is limited access to PrEP in England through clinical trials and online purchase predominantly from dedicated websites
- Previous use of PEP is associated with a high risk of subsequent HIV seroconversion at 56 Dean Street [1]
- For that reason, PEP users are offered web-based interventions (Dean Street Prime) including education programmes promoting risk reduction including PrEP [2]
- As PrEP becomes more widely available, PEP use at our service appears to be decreasing [3]
- One possible reason for this is that PEP users have initiated PrEP
- Therefore we wish to examine if previous PEP users have changed their HIV prevention strategies to using PrEP

Methods

- A retrospective case-note review of MSM who received PEP from 1 January 2013 to 30 June 2013 at 56 Dean Street, a central London sexual health service
- Case-notes were reviewed from first PEP to 1st November 2017 for most recent HIV test, repeat PEP use and PrEP initiation/use
- We determine the HIV incidence and use of repeat PEP and PrEP during the 12 months to 1st November 2017 in a cohort of MSM prescribed PEP in 2013

References

1. Whitlock G et al. (2017) High HIV incidence in men who have sex with men attending for postexposure prophylaxis: a service evaluation. *STI*, 93(3):214-216
2. Taghinejadi N et al. (2017) PRIME: a web-based HIV risk reduction package for high-risk MSM. Poster 100, BASHH-ISSTD conference
3. Suchak T et al. (2018) Declining PEP use: a consequence of PrEP? Poster 80, 4th joint BASHH/BHIVA conference

Results

HIV incidence

- Of 530 MSM attending for PEP in the study period, up to 1st November 2017, 69 subsequently became HIV-positive (13%; incidence rate; 5.4 per 100 person-years follow-up, 100PYFU)
- For the whole cohort, HIV incidence dropped from 6.1 per 100PYFU before January 2016 to 3.2 per 100PYFU after

PrEP Use

- Of 461 remaining HIV-negative MSM, 184 (40%) MSM re-attended our service in the 12 months prior to 1st November 2017
- Of these,
 - 52 (28%) disclosed PrEP use
 - 48 (26%) received repeat PEP from our service in the previous 12 months
 - 84 (46%) no recorded PEP or PrEP use
- Of the 52 PrEP users
 - 12 (23%) commenced PrEP before 2016
 - 15 (29%) during 2016
 - 25 (48%) in 2017

Discussion

- We have identified and targeted a cohort of MSM using our service at high risk of HIV seroconversion
- In this group, risk-reduction strategies are changing: over a quarter have initiated PrEP with half of these initiating PrEP in the last year
- During follow-up, their HIV incidence dropped
- The continuing high use of PEP suggests greater uptake of PrEP may be indicated