

What Support Services Providers Should Know About HIV Clinical Guidelines: Improving Health Outcomes Series

New York State Department of Health AIDS Institute

TOPIC: *Individualized PrEP to Prevent HIV and Promote Sexual Health*

WHAT IS PrEP?



BACKGROUND

Pre-exposure prophylaxis (PrEP) is a commonly used biomedical approach for promoting wellness and preventing an unwanted health outcome. In PrEP for HIV, a person who is not living with HIV takes antiretroviral medication to protect them in the event of a possible exposure to HIV. Clinical trials have consistently found HIV PrEP to be safe and effective for adults and adolescents when taken as prescribed. Expanding access to PrEP is one of the three pillars in New York's plan to end the AIDS Epidemic. Support services providers who serve people living in situations that place them at risk for HIV have an important role to play in promoting PrEP.

Examples of Pre-Exposure Prophylaxis

It may seem unusual to give medication to a healthy person, but here are some common examples:

1. Taking birth control pills to prevent pregnancy;
2. Taking anti-malaria medications when traveling to an area with possible exposure to malaria;
3. Taking antibiotics prior to dental surgery to prevent infection.

THE ROLE OF SUPPORT SERVICES PROVIDERS IN PROMOTING PrEP

Support services providers can play an important role in promoting appropriate use of PrEP by:

1. Presenting PrEP as a proactive way for adults and adolescents to promote their sexual health and referring people who can benefit from PrEP to a healthcare provider that prescribes PrEP;
2. Working as part of a team to provide clients who are taking PrEP with condoms, harm reduction support, HIV testing, STI screening, and referrals for other needed support services;
3. Supporting treatment adherence for people on PrEP by reinforcing the importance of following the treatment regimen as prescribed by the healthcare provider;
4. Educating clients that PrEP does not offer protection against other STIs and reinforcing the importance of condom use;
5. Helping clients on PrEP who receive a confirmed positive HIV test result to immediately access healthcare and begin an effective HIV treatment regimen;
6. Educating clients about paying for PrEP, navigating insurance or financial assistance programs.

Who can benefit from PrEP?

New York State HIV Clinical Guidelines indicate that medical providers should discuss PrEP as an HIV/STD prevention option for adults or adolescents who:

- Have unprotected anal or vaginal intercourse with: 1) a partner whose HIV status is unknown; 2) a partner who is living with HIV but not taking HIV treatment; or 3) a partner who is living with HIV but does not have an undetectable viral load;
- Have unprotected anal or vaginal intercourse with a partner who is living with HIV, on treatment and virally suppressed but wishes to be on PrEP for additional protection;
- Are attempting to conceive with a partner who is living with HIV;
- Have multiple or anonymous sex partners or, have partners who have multiple or anonymous sex partners;
- Participate in sex parties or sex at clubs or have partners who do this;
- Are involved in transactional sex, such as sex for money, drugs, or housing, including commercial sex workers and their clients, or have partners who do this;
- Have been diagnosed with at least one STI in the previous 12 months;
- Use of mood-altering substances during sex, such as alcohol, methamphetamine, cocaine, and ecstasy;
- Inject substances, or have partners who inject substances, including illicit drugs and hormones;
- Are receiving post-exposure prophylaxis (PEP) and have ongoing high-risk behavior or have used multiple courses of PEP.
- Self-identify as being at risk without disclosing specific risk behaviors.
- Acknowledge the possibility of, or anticipates risk behaviors in the near future.

INDIVIDUALIZING PrEP: NYS Clinical Guidelines outline PrEP as a flexible approach to promoting sexual health and preventing HIV. The following elements of PrEP can be negotiated between the individual and the healthcare provider, with ongoing assistance from support services providers, as needed:

1. **Same Day Start:** In most instances, individuals should be able to begin taking PrEP on the same day as their first appointment with the health care provider for PrEP. HIV testing should be conducted as part of the first visit. Individuals may begin taking PrEP while the results of the HIV test are pending. In cases where the result indicates that the person is living with HIV and the individual has already started PrEP, the healthcare provider should deliver the result and begin the person on an effective HIV treatment regimen as soon as possible, preferably on the same day that the diagnosis is available.
2. **Flexible Schedule of Medical Appointments:** Healthcare providers will work with each person to determine how often medical appointments are needed to manage PrEP. Depending on the PrEP option chosen (daily PrEP, on-demand or long-acting injectable PrEP) and their life circumstances, the person may need health care appointments every 4 to 8 weeks, every three months or may only need one or two appointments per year. People who need additional support with harm

reduction or treatment adherence can access it from a conveniently located support services provider.

3. **Screening for HIV/STIs and Other Bloodwork:** Individuals taking PrEP can work with their healthcare provider to make a plan for HIV/STI testing and other bloodwork. In some cases, the person may return to the healthcare providers office for testing but in others, it may be most convenient to have the testing done at a nearby lab, community-based organization, or other facility. Routine HIV testing is important for someone on PrEP. It provides the opportunity for early identification of HIV infection and the ability to prescribe treatment if the person acquires HIV. STI screening can sometimes be done by having a person do their own specimen collection via self-swabbing of the mouth, vagina or anus. Arrangements should be made to ensure that the results are forwarded to the healthcare provider. Support providers can play a key role in helping the client plan and access the most convenient screening services.
4. **Medication and Dosing Options:** As of July 2022, the U.S. Food and Drug Administration (FDA) has approved three medications as PrEP for HIV:
 - a. **Truvada (tenofovir disoproxil fumarate 300 mg/emtricitabine 200 mg)**
 - NYS Clinical Guidelines identify Truvada as the preferred oral regimen for daily or on-demand PrEP dosing.
 - Approved for use by all genders.
 - b. **Descovy (tenofovir alafenamide 25 mg/emtricitabine 200 mg)**
 - NYS Clinical Guidelines identify Descovy as an alternative oral regimen used only in daily PrEP dosing for cisgender MSM and transgender women.
 - Descovy is not approved for use by cis-gender women and is not for use during pregnancy.
 - c. **Apertude (Long-acting injectable cabotegravir 600 mg)**
 - NYS Clinical Guidelines identify Apertude as the preferred regimen.
 - Approved for use by all genders. Apertude is generally not an option during pregnancy.
 - May take oral medication if unable to attend a scheduled injection.
 - Not all clinical settings are prepared to administer long-acting injectable PrEP.

PrEP TO PROMOTE SEXUAL HEALTH: Sexual pleasure is an important part of a person’s overall sense of wellness. PrEP is a proactive way for a person to take charge of their sexual health. PrEP can enhance sexual pleasure by reducing worry about HIV, facilitating regular screening for STIs, and connecting people to a healthcare provider who supports their sexual health and pleasure. Support services providers have an important role to play educating their clients and communities about sexual health and promoting PrEP as a positive way of supporting their own health, the health of their partners, and the health of their larger social networks.

ASSISTANCE WITH PAYING FOR PrEP: Most health insurance plans, including Medicaid, cover the cost of PrEP without co-pays. This includes the medication, medical appointments and lab tests associated with PrEP. Some health insurance plans may require prior approval. For people without

access to health insurance with prescription drug coverage, a number of options for financial assistance are available. If you need information about financial assistance options for PrEP, visit the NYSDOH website at: https://www.health.ny.gov/diseases/aids/general/prep/docs/prep_payment_options.pdf.

OVERVIEW OF PrEP OPTIONS

| | Daily Oral PrEP | On-Demand Oral PrEP | Long-Acting PrEP |
|----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Who is it for? | People of all genders who have risk for HIV from sex or sharing injection equipment. | Only for MSM who have predictable periods of sexual risk for HIV and are able to begin taking medication 2-24 hours before having sex. | People of all genders who have risk for HIV from sex or sharing injection equipment. |
| How does it work? | The person takes one pill every day. Two different medications available for daily PrEP: <ul style="list-style-type: none"> • Truvada (TDF/FTC) • Descovy (TAF/FTC) | Truvada (TDF/FTC) only approved medication <ol style="list-style-type: none"> 1. An MSM or transgender woman takes 2 pills, 2-24 hours before having sex. 2. Continues to take 1 pill each day they have sex. 3. Takes 1 pill once a day for two days after the last time they have a possible sexual exposure | <ul style="list-style-type: none"> • May or may not begin with oral Cabotegravir (CAB) for 5 weeks. • Long-acting PrEP involves a person going to a health care facility to get injections of CAB-LA in the buttock. The initial injection is followed by a second injection at 4 weeks and then injections are given every 8 weeks. |
| What are the benefits of each method? | <ol style="list-style-type: none"> 1. A person has a simple daily habit of taking the medication. 2. Provides consistent protection. 3. Able to engage in sex or sharing injection equipment at any time with full protection. | <ol style="list-style-type: none"> 1. MSM and transgender women can take the medication only for the period of time when it is needed. 2. Possible fewer side effects. | <ul style="list-style-type: none"> • Important option for people whose life circumstances make it difficult to take an oral medication on a specific schedule. • Offers long-acting protection but person must be able to attend regular health care appointments and be OK receiving large volume injections in the buttock. |

HELP A PERSON FIND A PrEP PROVIDER: Use the NYSDOH voluntary [Provider Directory](#).

For the full *PrEP to Prevent HIV and Promote Sexual Health* clinical guidelines visit <https://www.hivguidelines.org/prep-for-prevention/>.