



# PrEP:

## It's a Game Changer

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### WE CAN HELP IMPROVE OR IMPLEMENT PRE-EXPOSURE PROPHYLAXIS!

#### Why PrEP is important?

Pre-exposure prophylaxis (PrEP) is an effective prevention strategy for reducing HIV acquisition risk by 90-99% if taken as prescribed and is recommended for men who have sex with men (MSM), intravenous drug users (IDUs), transgender men and women, and heterosexual adults who are at high risk for HIV infection.<sup>1</sup> PrEP is the use of antiretroviral medication to prevent acquisition of HIV infection; it consists of one pill taken once a day, and is efficacious and easy to use. At present, the only medication with an FDA-approved indication for PrEP is oral tenofovir-emtricitabine (TDF-FTC) which is available as a fixed-dose combination in a tablet called Truvada. Any licensed prescriber can prescribe PrEP. Primary care providers and settings should consider offering PrEP to patients at high-risk for HIV.

PrEP is part of a comprehensive prevention plan that includes adherence and prevention counseling, HIV risk behavior counseling, HIV prevention education, and the provision of condoms.

#### The Denver PTC can assist with:

- Clinic protocols for PrEP
- Peer-to-peer, patient specific consultation as needed
- Sexual risk assessment tools, resources to identifying eligible patients, and patient counseling tools
- Training on the science and implementation of PrEP and post-exposure prophylaxis (PEP), as well as the counseling that should be offered in support of PrEP
- Process documents and tools to assist with incorporating PrEP into your clinic's flow
- Pharmaceutical and pharmacy partnership guidance

# THE HIV PRE-EXPOSURE PROPHYLAXIS CHECKLIST:

- What to Consider Before Implementing PrEP**
  - Which of your patients are eligible for PrEP (i.e. persons who are at high risk of HIV infection and/or MSM, IDU, transgender men and women, or negative partners in a relationship with someone living with HIV)?
  - Is your clinical staff comfortable and skilled at taking a sexual history and asking patients about their sexual orientation and gender identity? Is this information collected at least annually?
  - Are you familiar with reimbursement issues in the context of sexual health, STD and HIV screening?
  - Do you currently have staff who are knowledgeable about accessing PrEP medication assistance programs?
  - Do you have local pharmacies who provide PrEP knowledgeably in your community? Are formal partnerships needed?
  - Are you able to screen for STDs and HIV for patients taking PrEP?
  - Which clinical team members can provide adherence counseling, ongoing behavioral counseling and other HIV prevention education?
  - Does your staff have a healthy understanding of PrEP?
  - If you do not currently offer post-exposure prophylaxis for non-occupational exposures, you should consider whether that might also be an option for patients. Do you need a transition plan for patients from nPEP to PrEP?

## Resources

<sup>1</sup> Grant RM et al. Preexposure chemoprophylaxis for HIV prevention in men who have sex with men. *New Engl Jour Med.* 2010, 363(27):2587-2599.

Co-pays through Truvada: . <http://www.truvada.com/truvada-patient-assistance>

PrEP Guidelines: <http://www.cdc.gov/hiv/pdf/PrEPguidelines2014.pdf>

