

Failing to PrEPare is PrEParing to Fail: Advocating for PWID PrEP Inclusion

Ebony Jackson, PharmD, CSP¹; Amanda Barner, PharmD, BCIDP, BCPS¹; Linda Shipton, M.D.²
 Department of Pharmacy¹, Division of Infectious Diseases²

Background



About 1 in 10 new HIV diagnoses in the United States are attributed to injection drug use or male-to-male sexual contact and injection drug use (men who report both risk factors).

- Pre-exposure prophylaxis (PrEP) can reduce the risk of HIV infection by greater than 90%
- PrEP remains underutilized
- The SARS-CoV2 pandemic, active drug use, mental illness, and homelessness create barriers to preventative care
- Since 2019, there's an ongoing HIV outbreak among PWID in the Boston area

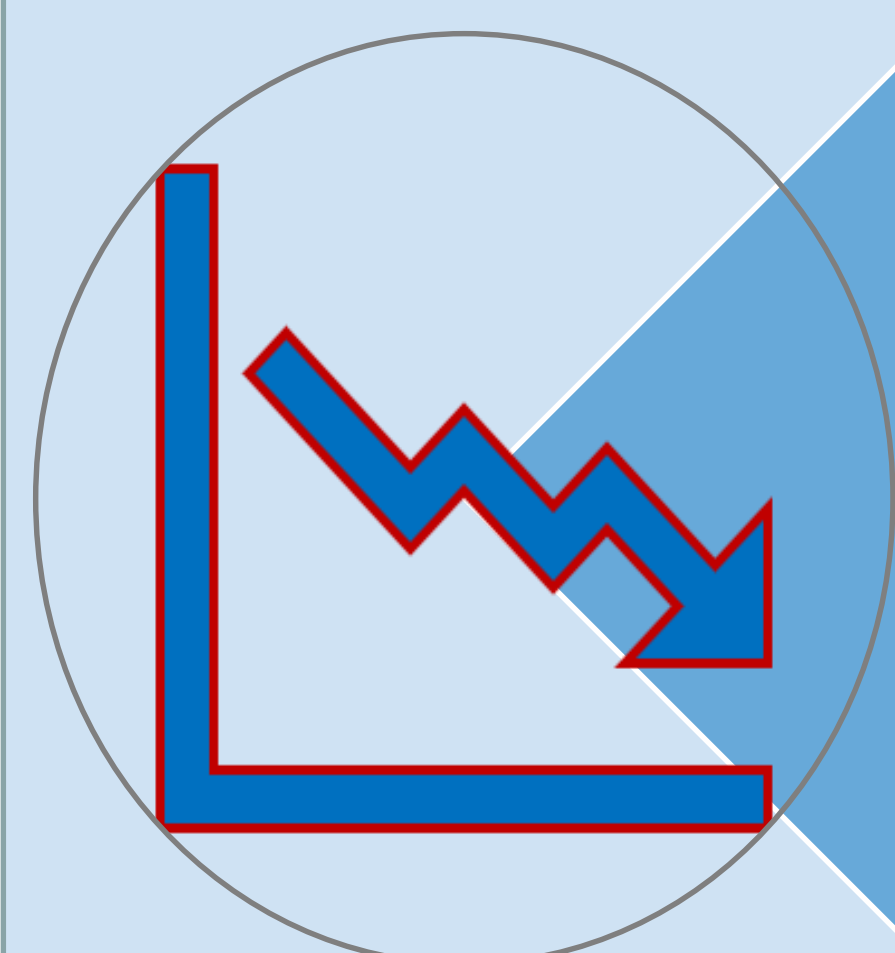
Purpose

- Develop a collaborative program with infectious diseases and pharmacy to minimize barriers and increase education surrounding PrEP in PWID

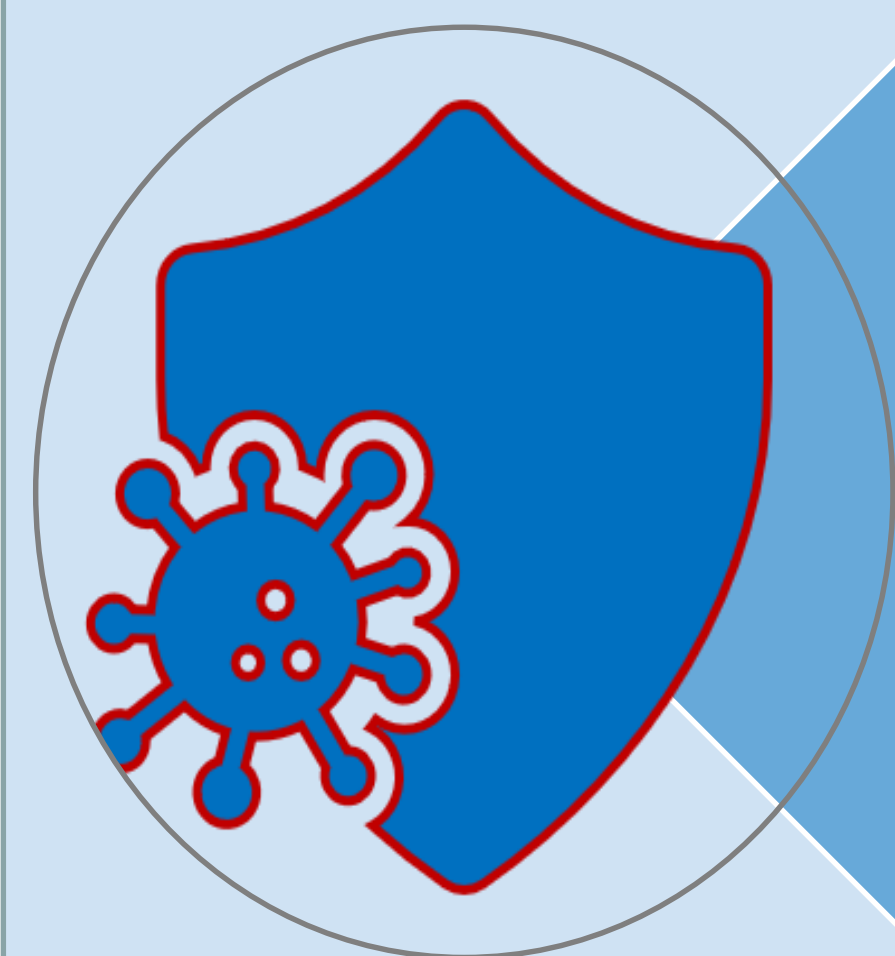
Methods

- In July 2020, CHA launched the Specialty Pharmacy PrEP protocol which allowed pharmacists to prescribe and monitor daily tenofovir disoproxil /emtricitabine (TDF/FTC) for referred PWID
- Inclusion Criteria: Adult patients admitted to the hospital with IVDU related complications
- Exclusion criteria: Patients with HIV, active hepatitis B, or a creatinine clearance < 30 mL/min

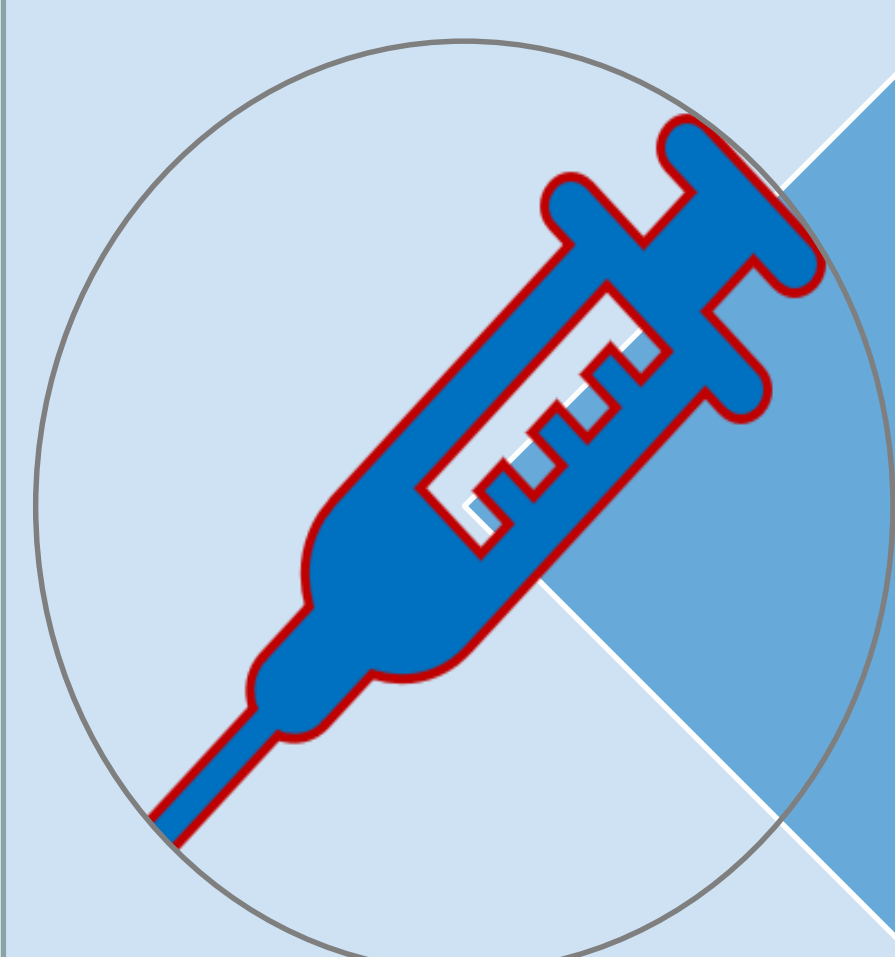
Conclusions



Patients admitted to the hospital for IVDU related complications who agreed to PrEP with daily TDF/FTC had a low retention rate after discharge



Based on a high rate of IVDU related ED visits and hospitalizations, many patients remained at risk of HIV acquisition despite opting out of the program

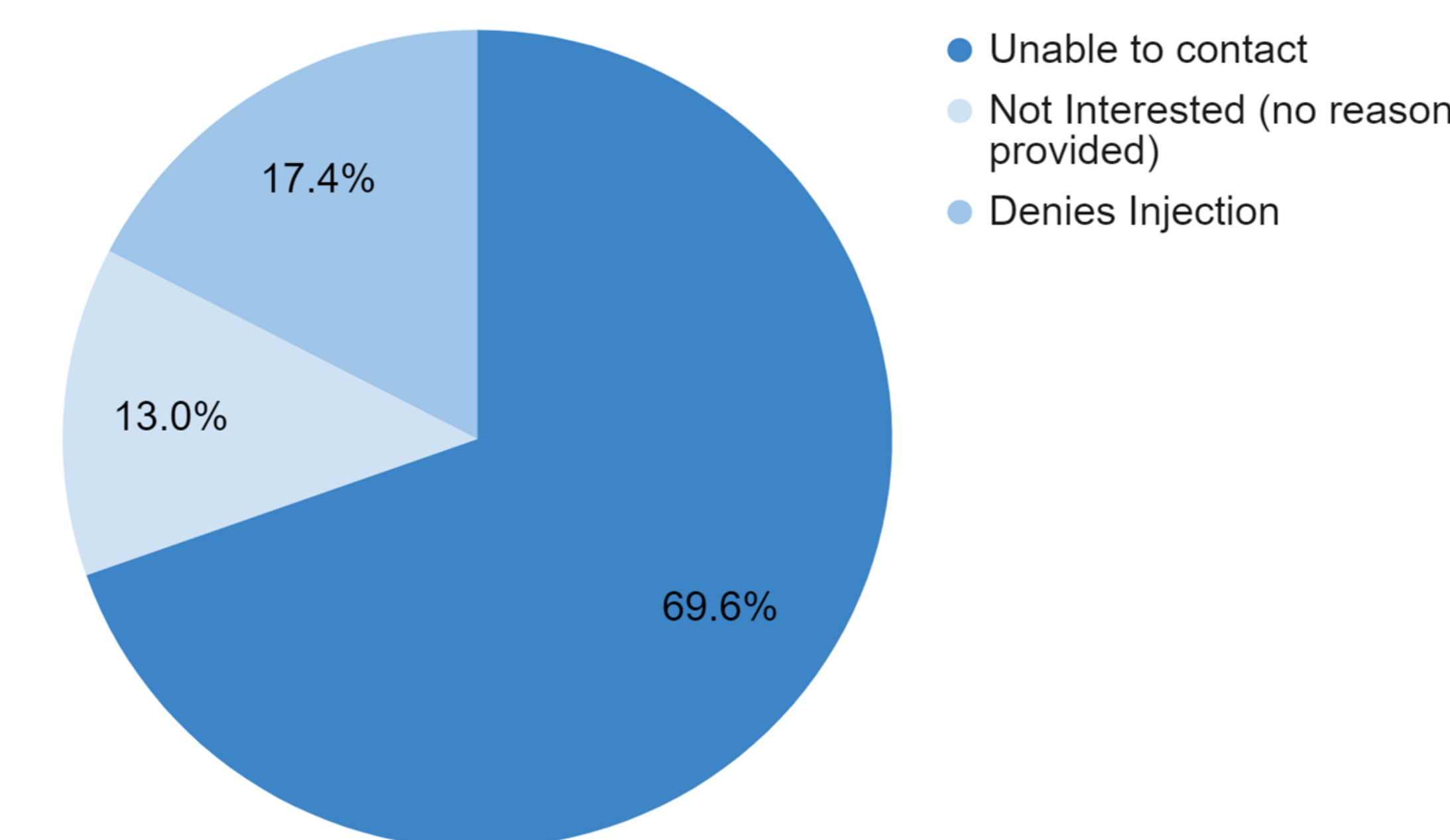


PWID need to be included in PrEP studies, especially those evaluating novel agents that may be more successful in this population than a daily pill

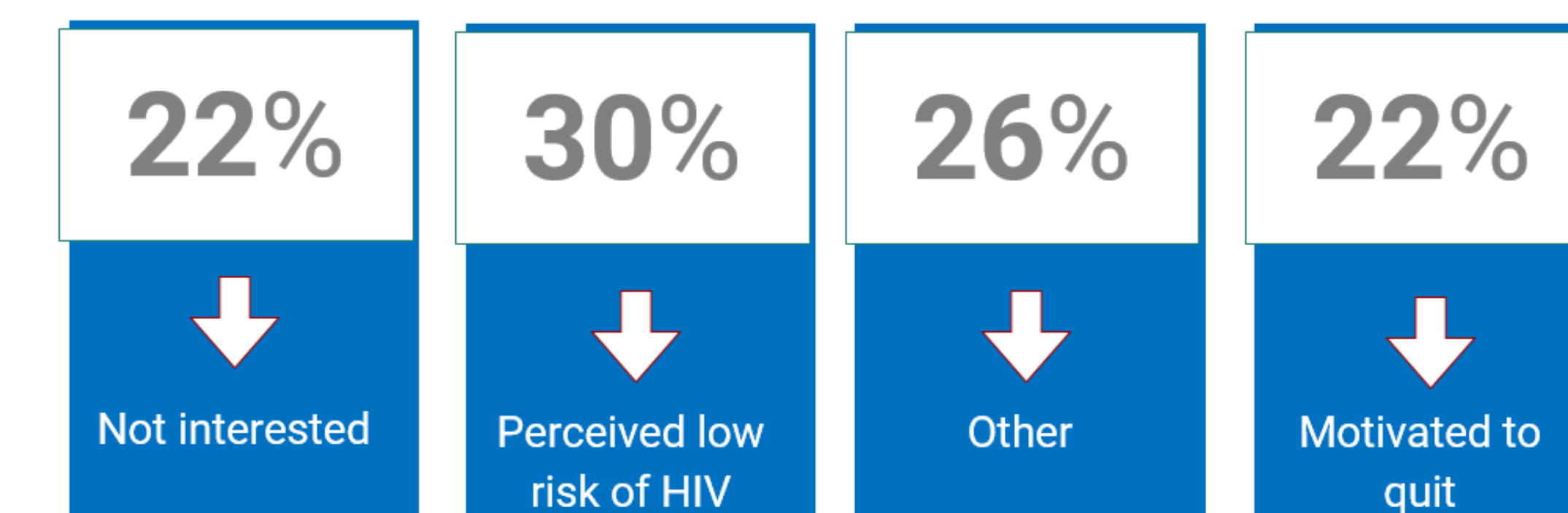
Results

- Nov 2020-March 2022, 23 patients accepted referral into the program
- 87% (n=20) did not remain in the program to receive the 1st month supply of TDF/FTC
- 3 patients received at least 1 months of TDF/FTC, 2 opting out after the 1st month and the 3rd opting out after 5 months
- 8 (35%) patients had at least 1 IVDU related ED visit or hospitalization within 90 days of opting out of the program

Reported Reason for Program Discharge, n=23



- May 2021-March 2022, 23 additional patients declined program referral



References

- Centers for Disease Control and Prevention. HIV Surveillance Special Report. 2018;18:1-38.
- N Engl J Med. 2010;363(27):2587.
- N Engl J Med 2012; 367:399-410.
- Lancet 2020 Jul 25;396(10246):239-254.
- <https://www.bostonglobe.com/2022/03/17/metro/hiv-outbreak-among-drug-users-accelerates-boston/>

