

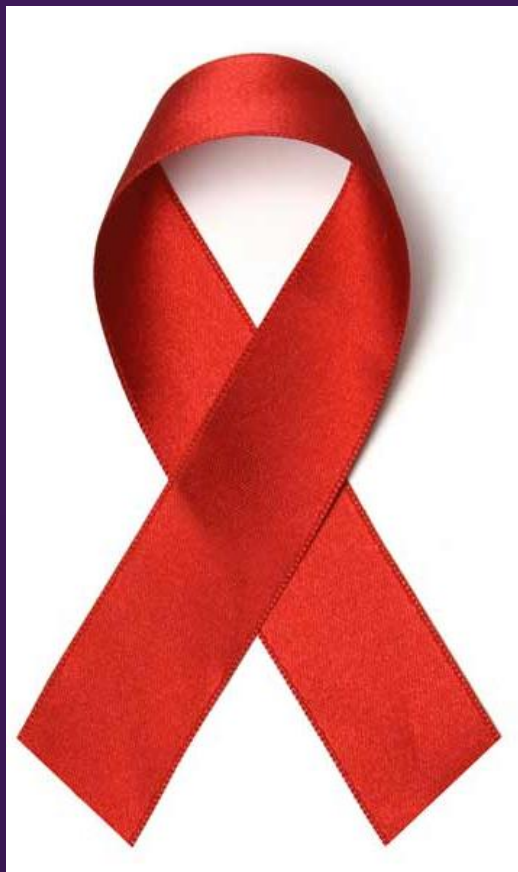
Familiarity with and Preferences for Oral versus Long-acting Injectable PrEP in a US National Sample of Gay and Bisexual Men

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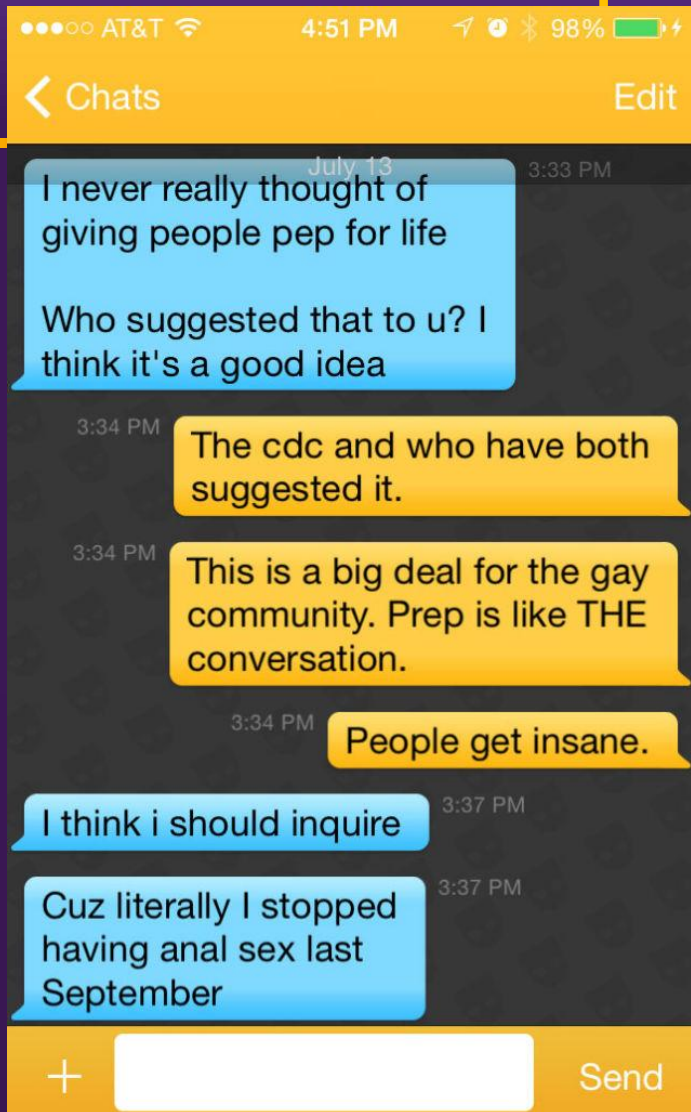


The continuing epidemic...



- The prevalence of HIV for gay and bisexual men (GBM) continues to grow. GBM accounted for 65% of new diagnoses in 2013, a 12% increase since 2008.
- GBM are among the only groups to see increased incidence in recent years. Particularly among young GBM of color

Biomedical prevention strategies



- One of the most promising biomedical prevention tools currently available (i.e., FDA approved) is once-daily Truvada.
- However, uptake has been slow for a multitude of possible reasons.
- Bottom line: *PrEP only works when you take it.*

Forms of oral PrEP



- Once-daily Truvada (Emtricitabine and Tenofovir). When daily adherence is met, it has been shown to be 95% effective in the prevention of HIV. Demonstration studies have shown daily adherence to be suboptimal.
- Alternate Dosing Strategies:
 - Intermittent Truvada- Because of the half-life of the drug, it is taken 2-3 days a week. On-going trials are assessing the efficacy and adherence.
 - On-Demand Truvada – Taken preceding and following sex events

A pill may not be for everyone



- Forgetting to take
- Not having it on you
- Rx runs out and not renewing
- Lapse in visiting Dr. to renew Rx
- Stigma of carrying a bottle
- Dealing w/ insurance coverage on a monthly basis
- Swallowing a large pill
- Traveling for a long period of time
- Accidental overdose

Long-Acting Injectable (LAI) PrEP



- Long-acting injectable (LAI) PrEP is currently being studied as an alternative to daily and intermittent PrEP. It consists of a single dose ~ every 90 days.
 - 100% efficacy has been produced with monkeys. Efficacy in HIV-negative men is currently underway.
- One study (Meyers et al, *PLoS One*) found 80% would be LAI willing, 79.2% preferred injection every 3 months vs. daily pill/neither.

Then again... needles!!!!



- Fear of needles
- Site reaction from a needle
- Decisions ...
 - Finding a Dr. who has the drug in office
 - Being administered the drug by a pharmacist
 - Going to a pharmacy to pick up drug and then return to Dr. for administration.
- *Although not for everyone, it may be an acceptable alternate for those who cannot/will not take oral PrEP*

Question:



Should LAI-PrEP prove effective in humans, it is necessary to explore acceptability.

Is there a difference in the preference for LAI vs. once-daily PrEP among GBM?

Hypothesis

- 1. GBM will be largely unaware of the existence of PrEP in the form of a LAI.
- 2. Once informed of LAI PrEP, GBM will report a preference to LAI vs. both once-daily and intermittent PrEP.



One Thousand Strong:

Syndemics & Resilience for HIV Transmission in a National Sample of Vulnerable Men

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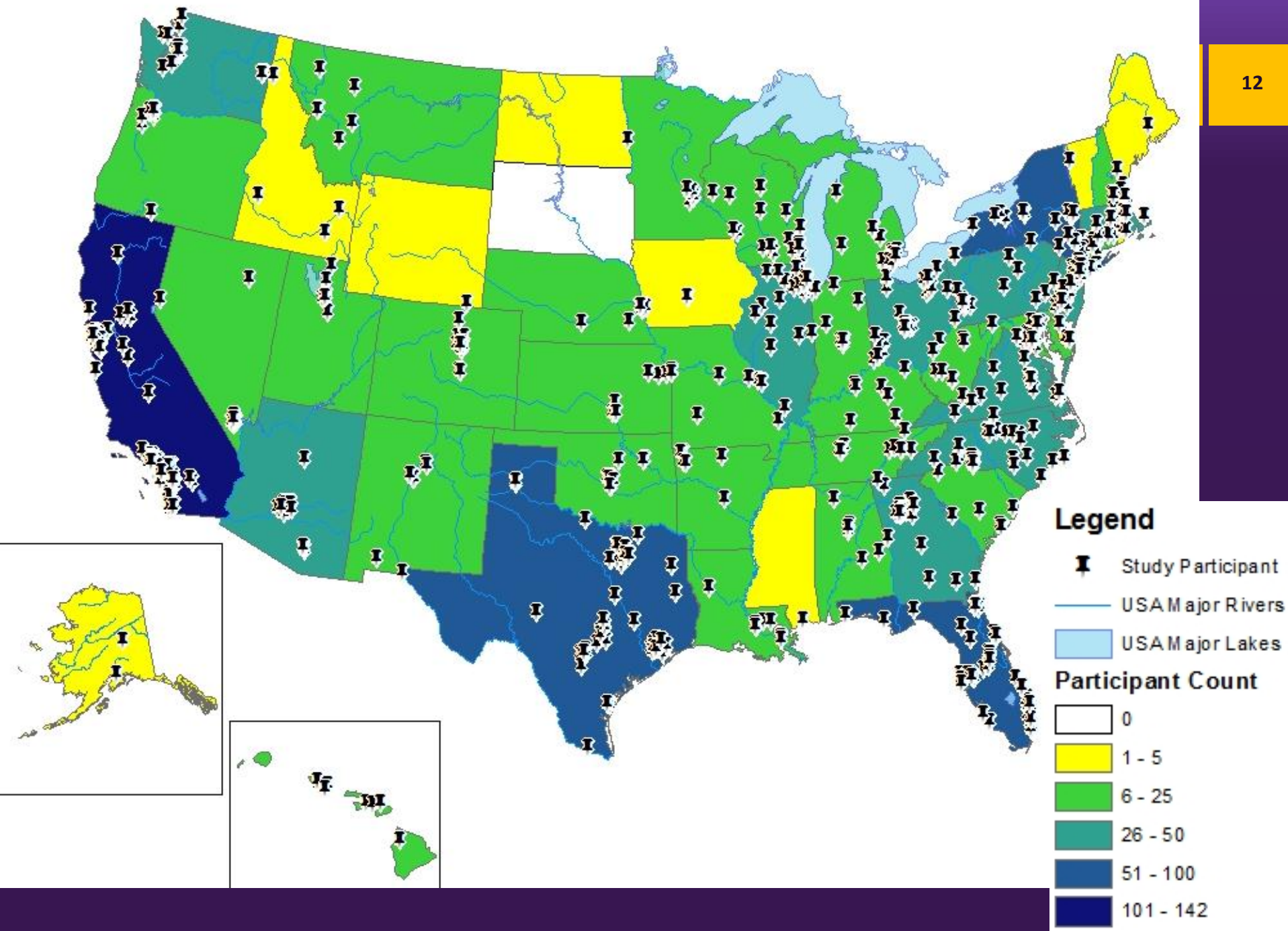


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Methods

- Recruited by Community Marketing and Insights (CMI)
- Eligibility
 - Live in U.S. with a permanent U.S. mailing address
 - 18 years and older
 - Biologically male and identify as male
 - Self-identify as gay/bi
 - English comprehension
 - Internet access
 - Device for taking digital pictures
 - Self-identify as HIV-negative and willing to complete at-home self-administered rapid HIV antibody, chlamydia, and gonorrhea testing
 - Report having sex with another man in the past year

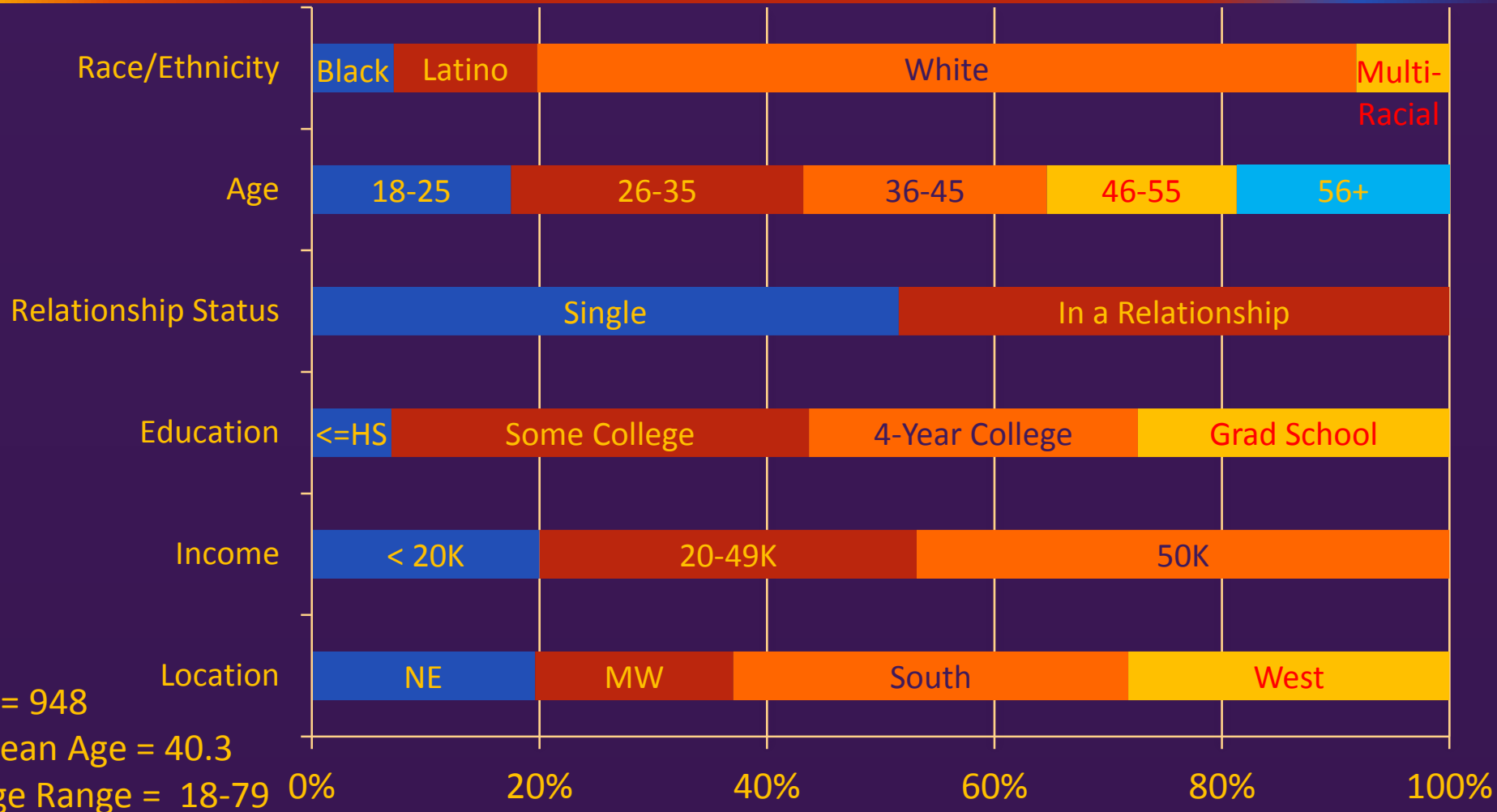


Data Collection

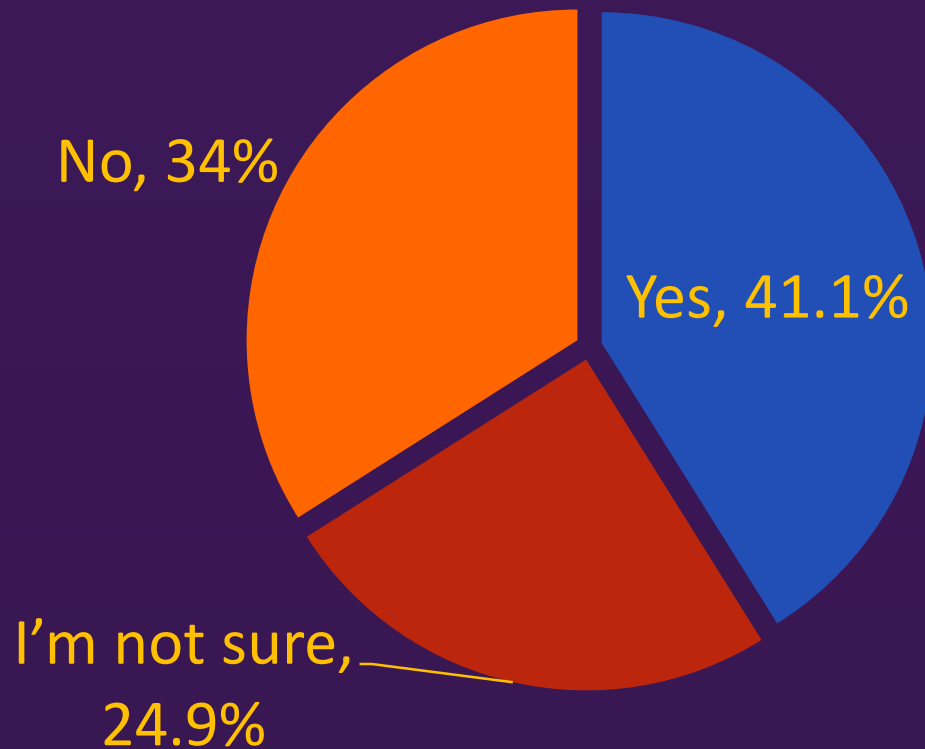


- At baseline, completed an at-home CASI, followed by at-home HIV and STI testing..
 - Final *baseline* sample for *One Thousand Strong* consisted of 1,071 HIV-negative GBM.
- Data for this study are taken from a 6 month “check in” survey ($n = 948$, 88% retention). $n = 2$ dx HIV+
- Data were collected from Jan – April 2015.

Demographic Characteristics



Are you an appropriate candidate for PrEP?

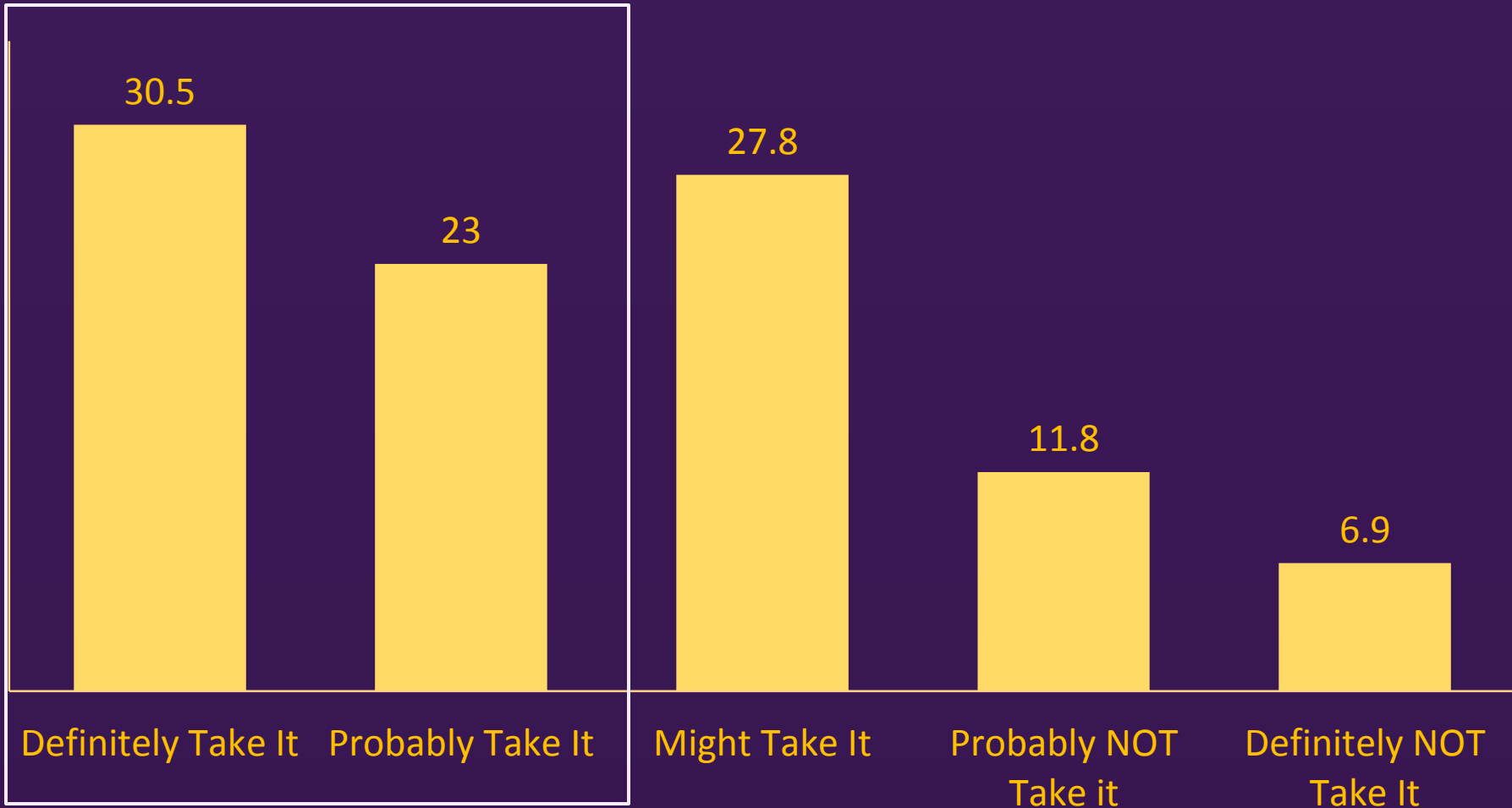


Familiarity with LAI PrEP

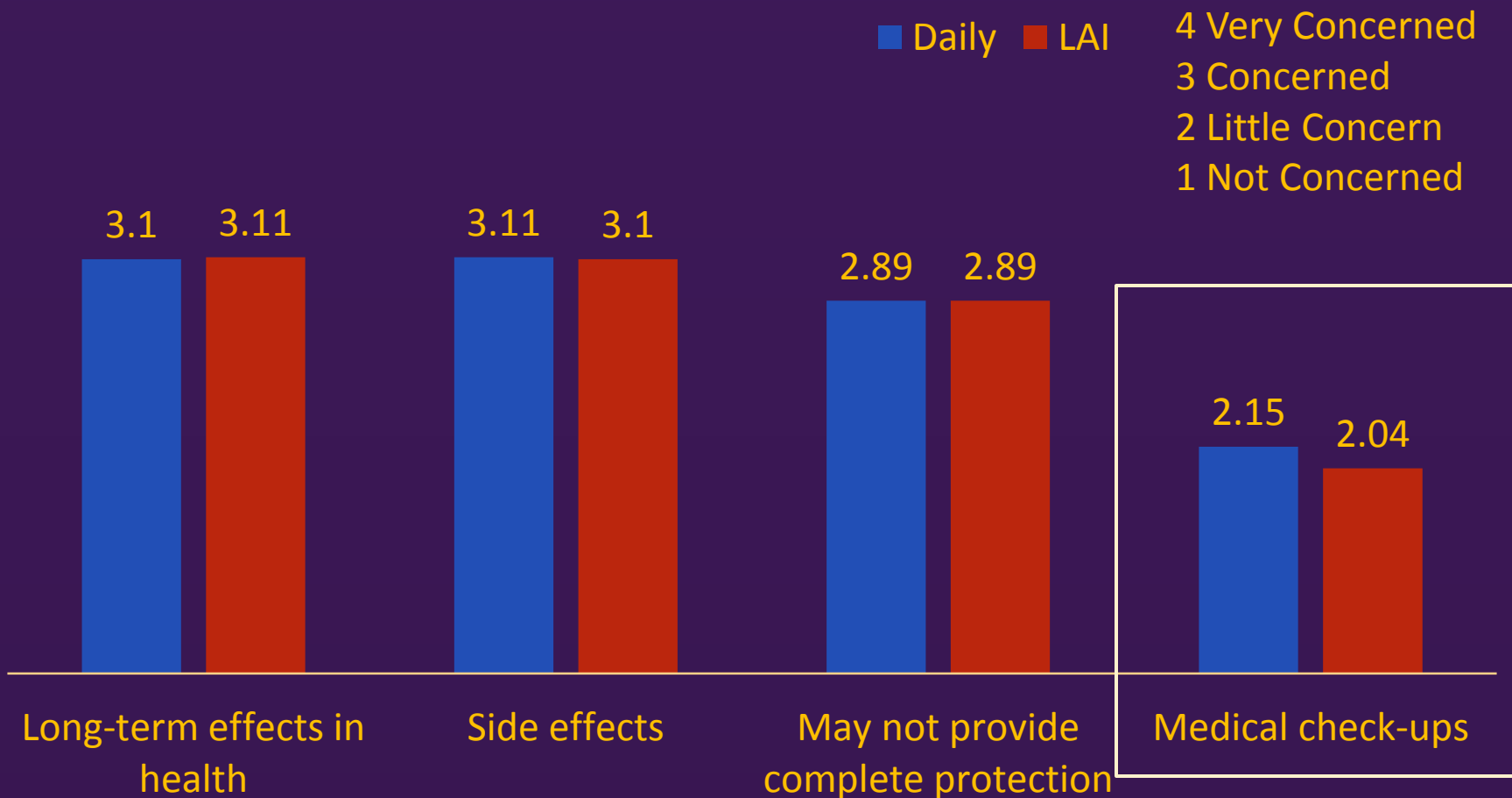
- 84.1% ($n = 797$) indicated “I’ve never heard of it before today”.
- 12.8% ($n = 112$) indicated “I’ve heard about it, but I don’t really know what it is” or “I know a little about it”.
- 3.2% ($n = 30$) indicated “I know a fair amount about it” or “I know a lot about it”.



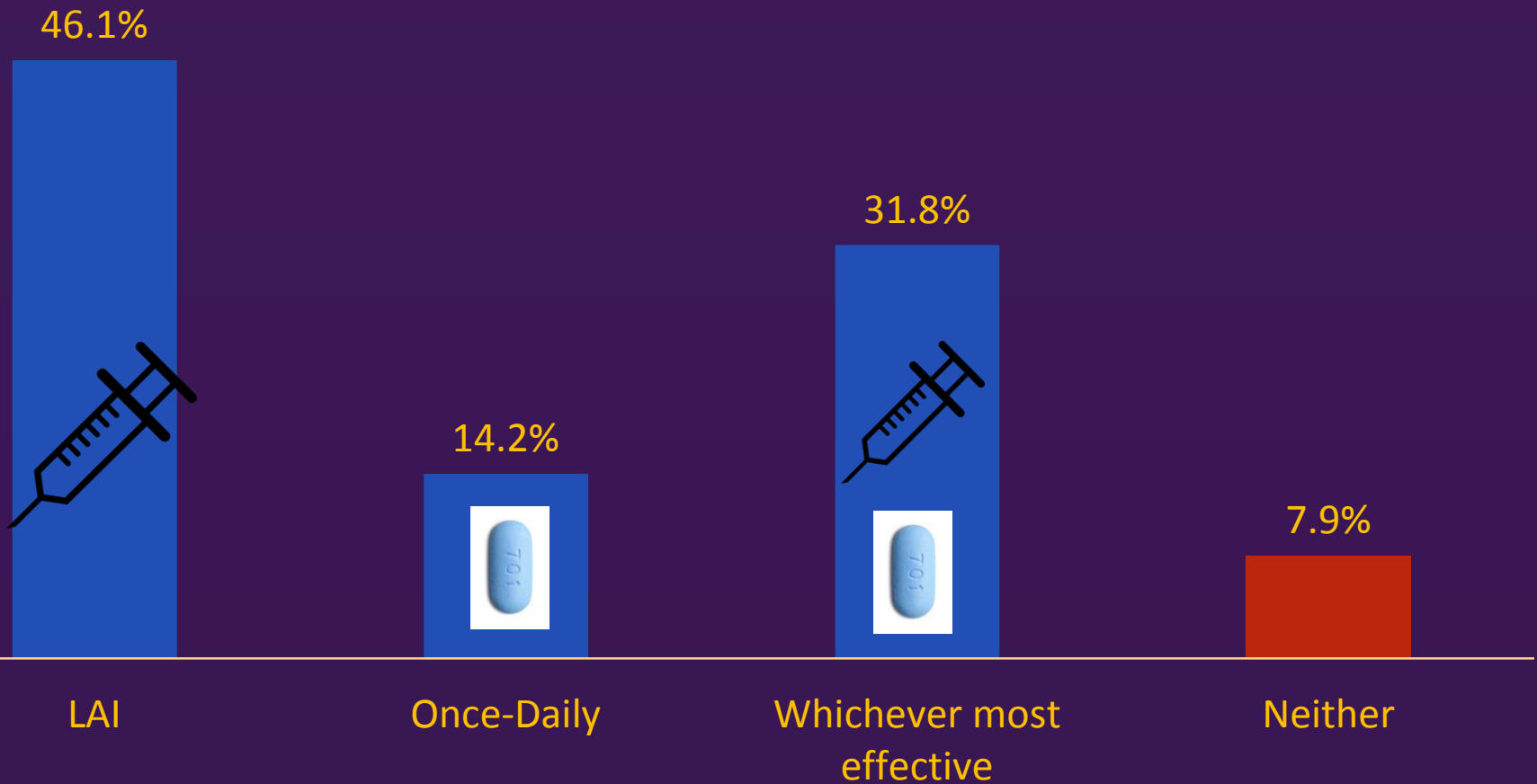
If LAI was at least 90% effective in preventing HIV when injected every 90 days...



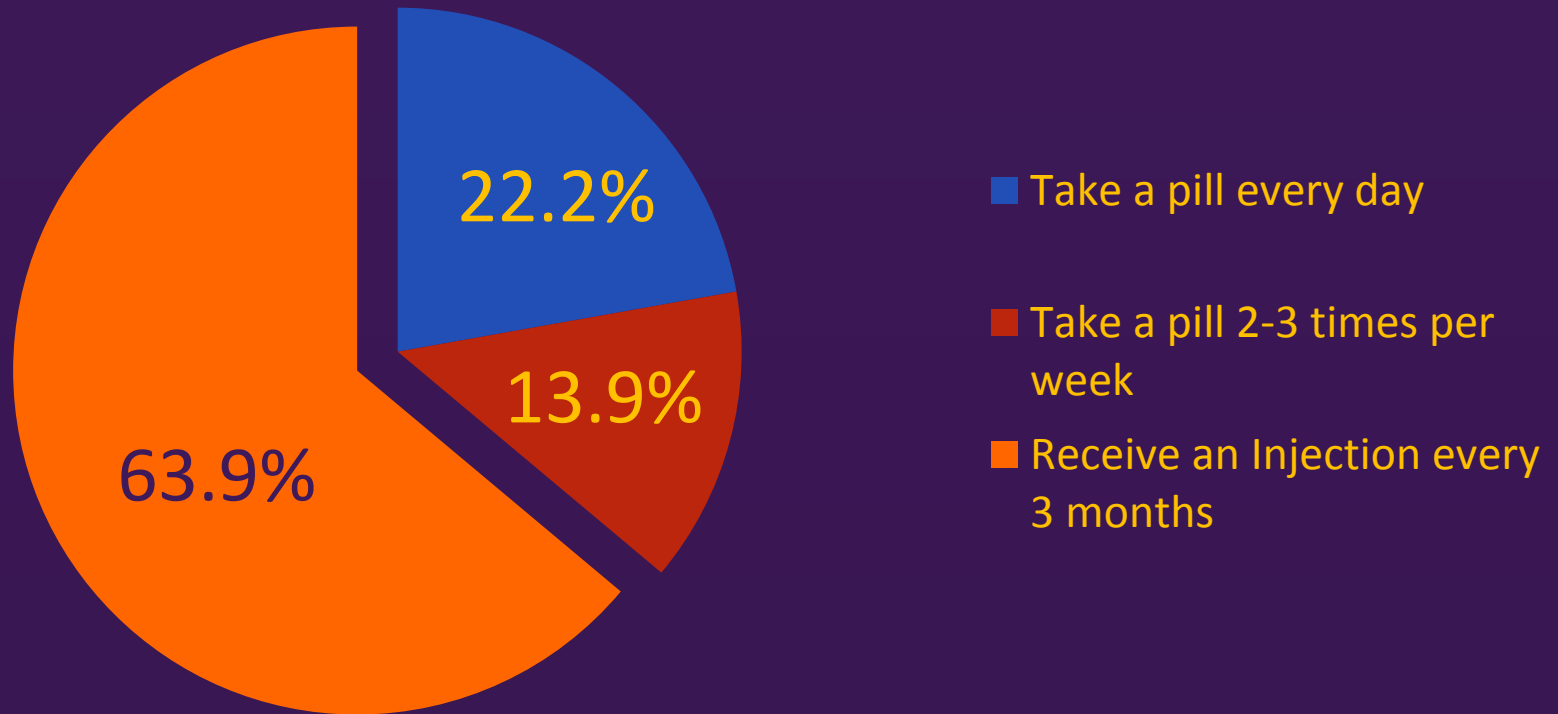
How important are the following in making the decision to use..... [Once Daily] [LAI]



Given a choice between LAI and once-daily PrEP



In general, are you the type of person who would rather...



What does this mean?

- Not surprisingly, most GBM are largely unaware of LAI PrEP.
- High interest in LAI PrEP compared to both once-daily, and intermittent PrEP.
 - However, a quarter of our sample was most interested in whichever form of PrEP is most effective.
- “Adding” LAI PrEP to the array of biomedical options will improve HIV prevention.



Limitations

- We asked about LAI PrEP under the context of the drug being offered for free.
- We also speculated about its effectiveness
- U.S. national sample of men—overall well educated, majority White, M age = 40
- Intentions are a good predictor of behavior, yet there is a “cascade”

Remaining Questions



- Although our sample reported interest in LAI PrEP when it is offered for free, we do not know how much that would change based on price.
- Insurance coverage? Co-pay coverage?
- Risk compensation has been shown to be very low w/ Oral PrEP. Unclear what will happen with those on LAI-PrEP (will men become “safer” toward the end of the 90 days?)

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Thank you

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