### Adherence to Post-Exposure Prophylaxis for Non-Forcible Sexual Exposure to HIV: A Meta-Analysis

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### Conflicts of Interest

• None to declare

## Post-Exposure Prophylaxis

- Initiated within 72 hours of exposure
- 2- or 3-drug regimen for 28 days
- What proportion of individuals who access PEP for non-forcible sexual exposure successfully complete the 28-day regimen?

Smith et al, Antiretroviral postexposure prophylaxis after sexual, injection-drug use, or other nonoccupational exposure to HIV in the United States. MMWR Recomm Rep. 2005.

Post-exposure prophylaxis to prevent HIV infection: joint WHO/ILO guidelines on post-exposure prophylaxis (PEP) to prevent HIV infection





### Search Strategy

- 3 electronic databases searched: MEDLINE, EMBASE, and PsycINFO
- Searched permutations of: post-exposure prophylaxis, adherence, HIV, non-occupational





## Eligibility Criteria

#### Inclusion Criteria:

- Includes primary data
- Includes data on adherence to PEP

#### **Exclusion Criteria:**

• Occupational exposure, sexual assault, or injection drug use as primary source of exposure (>25% of mixed cohort due to exposure other than nonforcible sexual exposure)

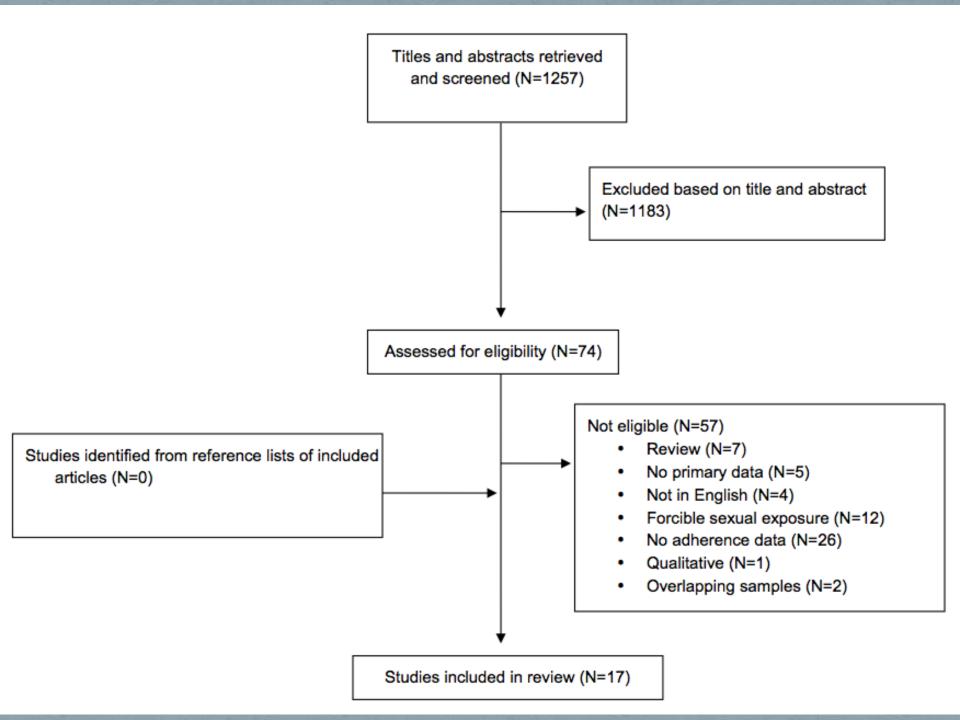
#### Outcomes

**Primary outcome:** proportion adherent to 28-day PEP regimen

Secondary outcomes: refusals, loss to follow-up







# Study Characteristics (1)

- Region of origin:
  - Europe: N=8
  - United States: N=6
  - Australia, Brazil, Kenya: N=1 each
- Exposure:
  - MSM: N=7
  - Mixed: N=9





# Study Characteristics (2)

- Adherence measure
  - Self-report: N=5
  - Pill count: N=2
  - Self report and pill count: N=3
  - Retention in treatment: N=1
- Treatment regimen
  - Zidovudine-based: N=10
    - Zidovudine/lamivudine: N=6
      - + neflinavir, atazanavir, or ritonavir: N=4
  - Tenofovir-based: N=5
    - Tenofovir/emtricitabine: N=3
      - +raltegravir: N=1
    - Tenofovir + lamivudine: N=1



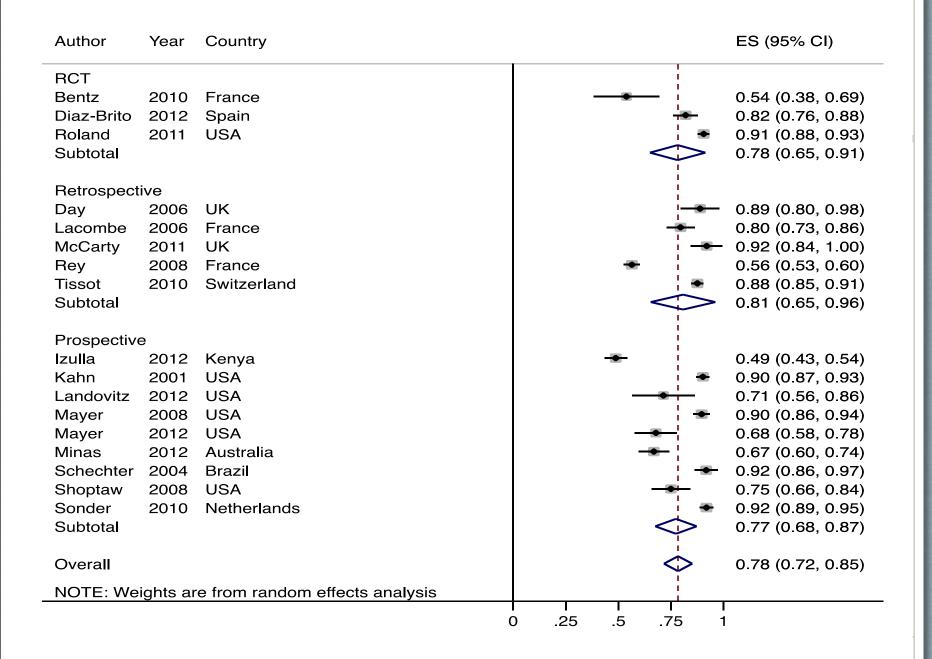


### Adherence

- Overall pooled adherence: 78% (95% CI 72 to 85%)
  - Ranging from 49 to 92% in individual studies
- Randomized-controlled trials: 78% (65 to 91%)
- Prospective observational studies: 77% (68 to 87%)
- Retrospective studies: 81% (65 to 96%)







### Meta-Regressions

No significant difference in adherence by:

- RCT (vs. observational)
- Risk reduction intervention (vs. no risk reduction intervention)
- 3-drug regimen (vs. 2-drug)
- MSM (vs mixed cohort)
- Pill count (vs. self-report)





### Conclusions

- Adherence to PEP after non-forcible sexual exposure to HIV is moderately high
- Studies were highly heterogeneous
- No studies used biomarkers to validate self-report or pill count measures
- More accurate measures of PEP adherence will improve estimates





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