Rilpivirine-Tenofovir DF-Emtricitabine as PEP in MSM

EPEP Study
RPV-TDF-FTC as Postexposure Prophylaxis in MSM

EPEP: Study Design

**Study Design: EPEP Study**

- **Background**: Open-label, single-arm study evaluating the adherence and efficacy of RPV-TDF-FTC as a single-tablet regimen for PEP in men who have sex with men (MSM)

- **Inclusion Criteria (n = 100)**
  - Age ≥ 18 years
  - Healthy MSM without HIV infection
  - Eligible for 3-drug PEP based on exposure risk
  - No resistance to study drugs
  - No previous RPV-TDF-FTC for PEP
  - No hepatitis B infection

- **Postexposure Prophylaxis Regimen**
  - Rilpivirine-tenofovir DF-emtricitabine

RPV-TDF-FTC as Postexposure Prophylaxis in MSM EPEP: Result

Week 4: PEP Completion or Premature Cessation

![Bar chart showing PEP completion, lost to follow-up, and cessation due to adverse events and study burden.]

- **PEP completion**: 92%
- **Lost to follow-up**: 6%
- **Cessation due to adverse event**: 1%
- **Cessation due to study burden**: 1%

Week 4: Adherence to 28-day PEP Regimen

**Adherence Measure**

- **By pill count**: 99%
- **By self-report**: 99%
- **By plasma tenofovir level**: 88%

Number of cases of HIV acquisition at week 12:

Conclusions: “A single-tablet regimen of FTC-RPV-TDF was well tolerated as once-daily PEP, with high levels of adherence and completion.”
Acknowledgment

The National HIV Curriculum is an AIDS Education and Training Center (AETC) Program resource funded by the United States Health Resources and Services Administration. The project is led by the University of Washington and the AETC National Coordinating Resource Center.

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