

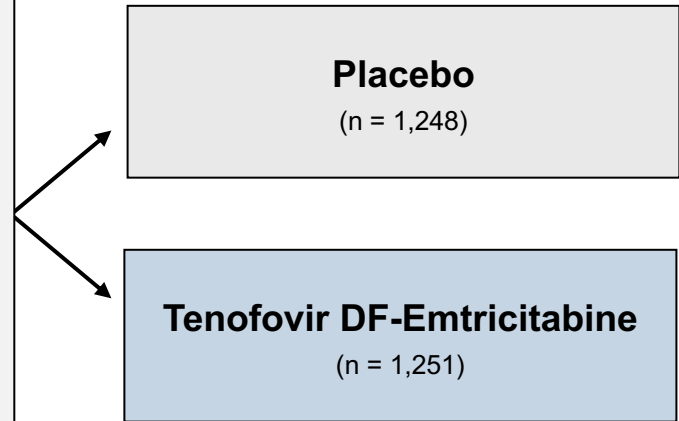
TDF-FTC versus Placebo as HIV PrEP for MSM and TGW

# **iPrEx Trial**

# TDF-FTC versus Placebo as HIV PrEP for MSM and TGW

## iPrEx Trial: Study Design

- **Background:** Randomized, placebo-controlled trial that examined efficacy and safety of tenofovir DF-emtricitabine as preexposure prophylaxis for HIV-seronegative men (or transgender women) who have sex with men
- **Inclusion Criteria** (2,499 enrolled)
  - 18 years of age or older
  - HIV-seronegative
  - Men (or transgender women) who have sex with men
  - Evidence of high-risk for HIV acquisition
- **Treatment Arms**
  - Placebo: 1 pill daily
  - Tenofovir DF-emtricitabine: 1 pill daily

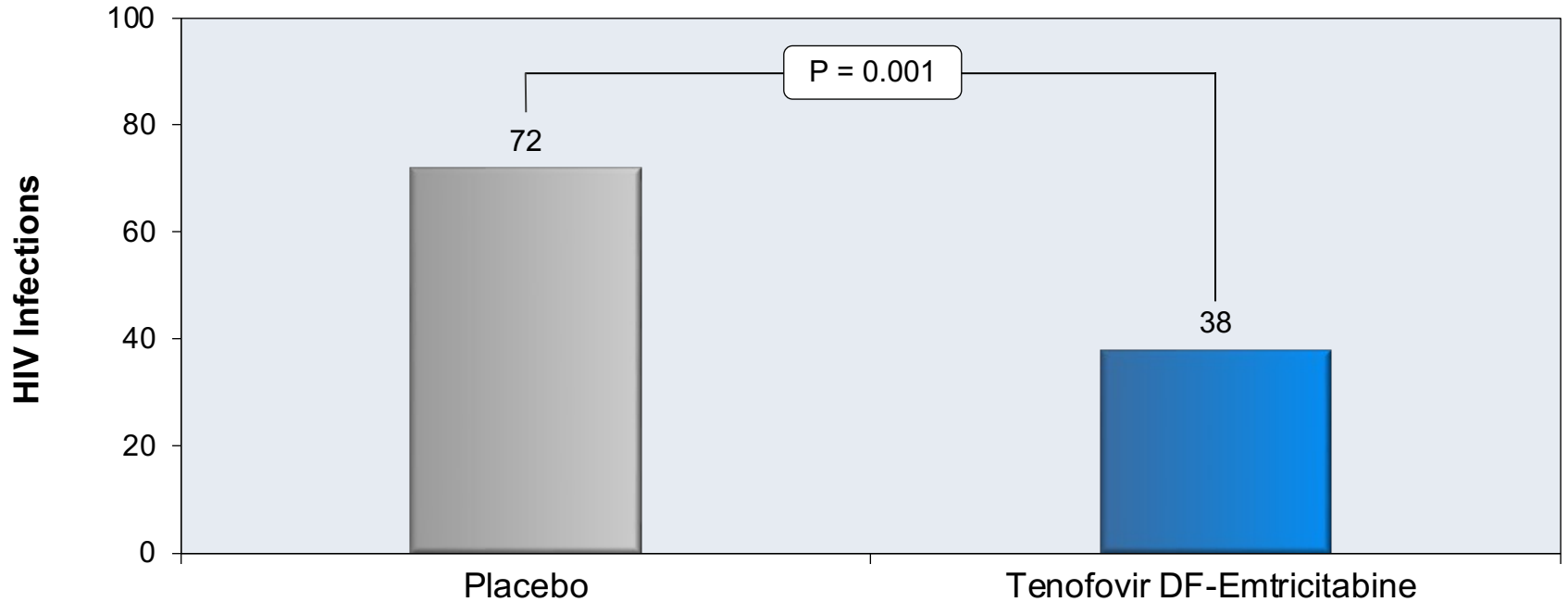


**Note:** 10 subjects had HIV infection at onset of study

Source: Grant RM, et al. N Engl J Med. 2010;363:2587-99.

# TDF-FTC versus Placebo as HIV PrEP for MSM and TGW iPrEx Trial: Results

Number of HIV Infections: Intent-to-Treat Analysis

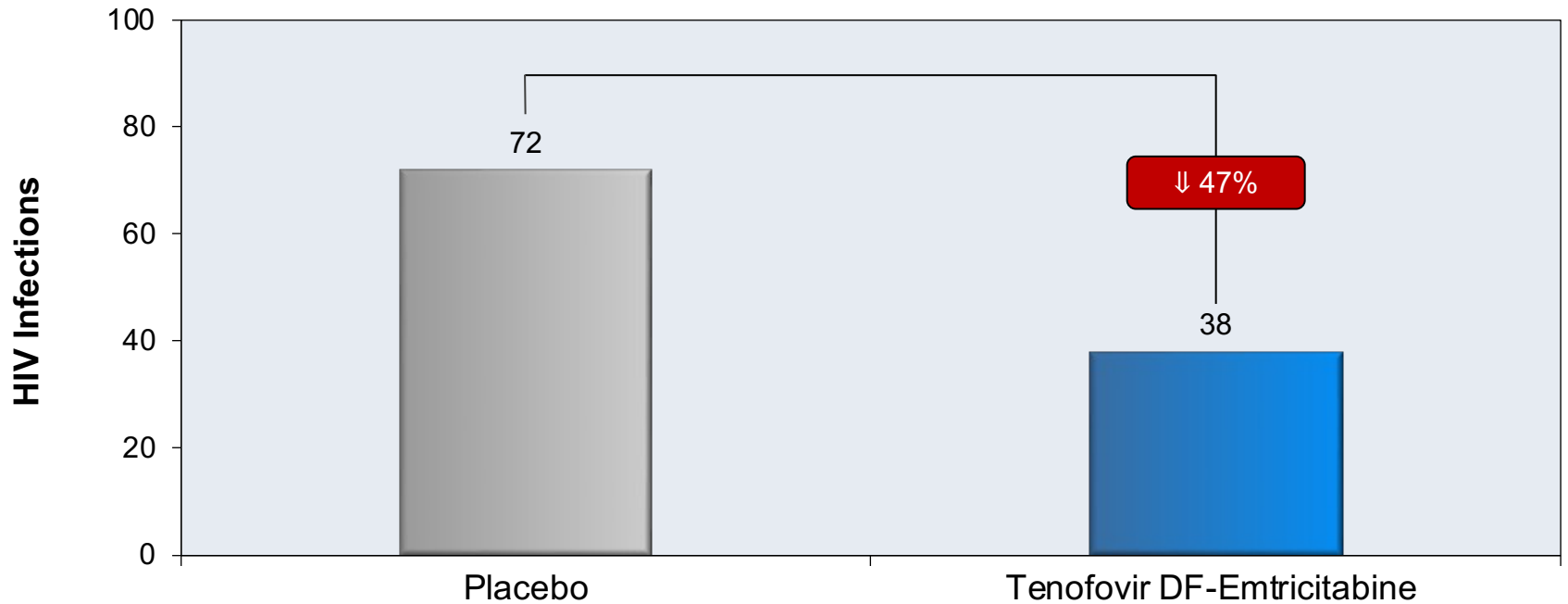


Source: Grant RM, et al. N Engl J Med. 2010;363:2587-99.

# TDF-FTC versus Placebo as HIV PrEP for MSM and TGW

## iPrEx Trial: Results

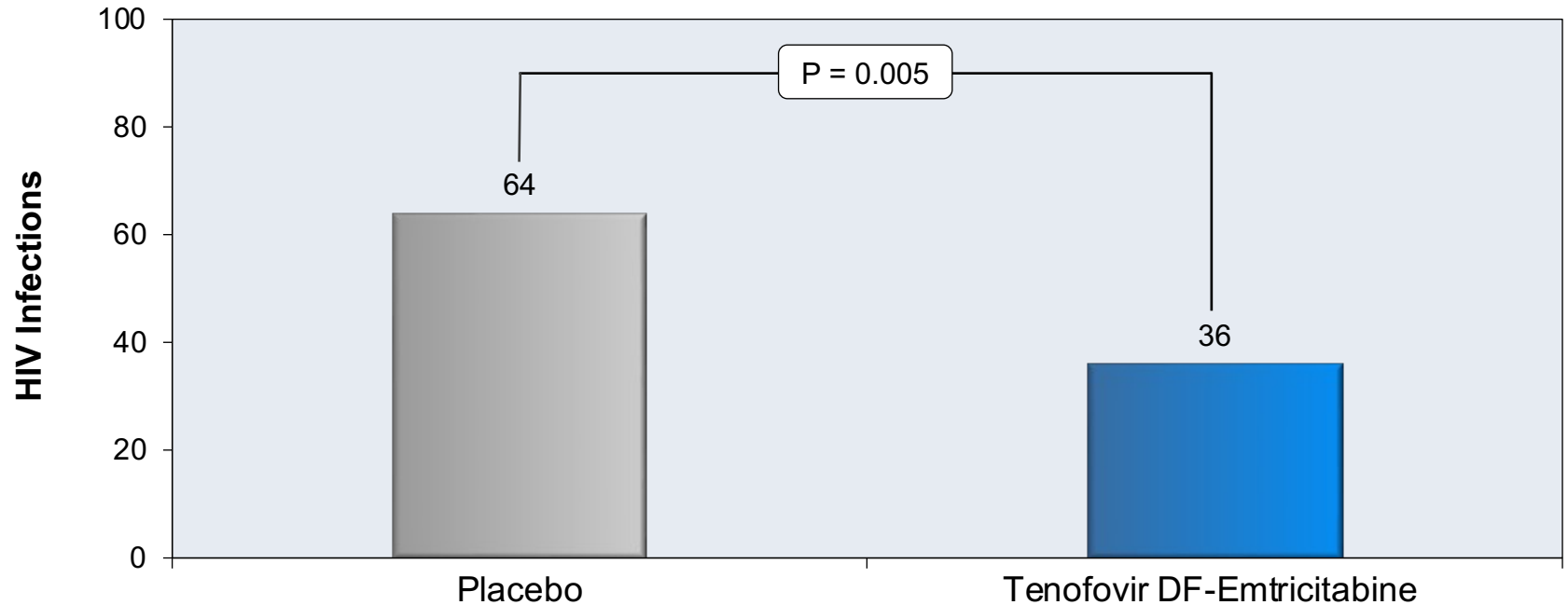
Risk Reduction Compared with Placebo: Intent-to-Treat Analysis



Source: Grant RM, et al. N Engl J Med. 2010;363:2587-99.

# TDF-FTC versus Placebo as HIV PrEP for MSM and TGW iPrEx Trial: Results

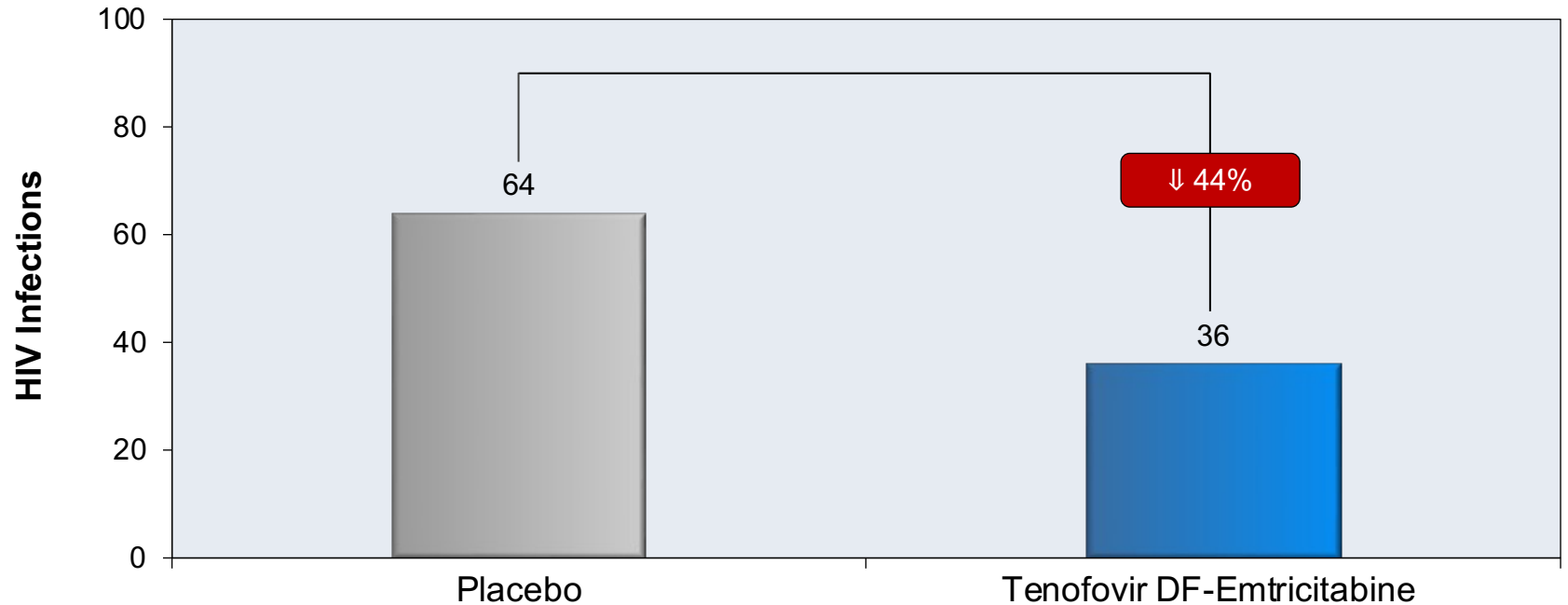
Number of HIV Infections: Modified Intent-to-Treat Analysis



Source: Grant RM, et al. N Engl J Med. 2010;363:2587-99.

# TDF-FTC versus Placebo as HIV PrEP for MSM and TGW iPrEx Trial: Results

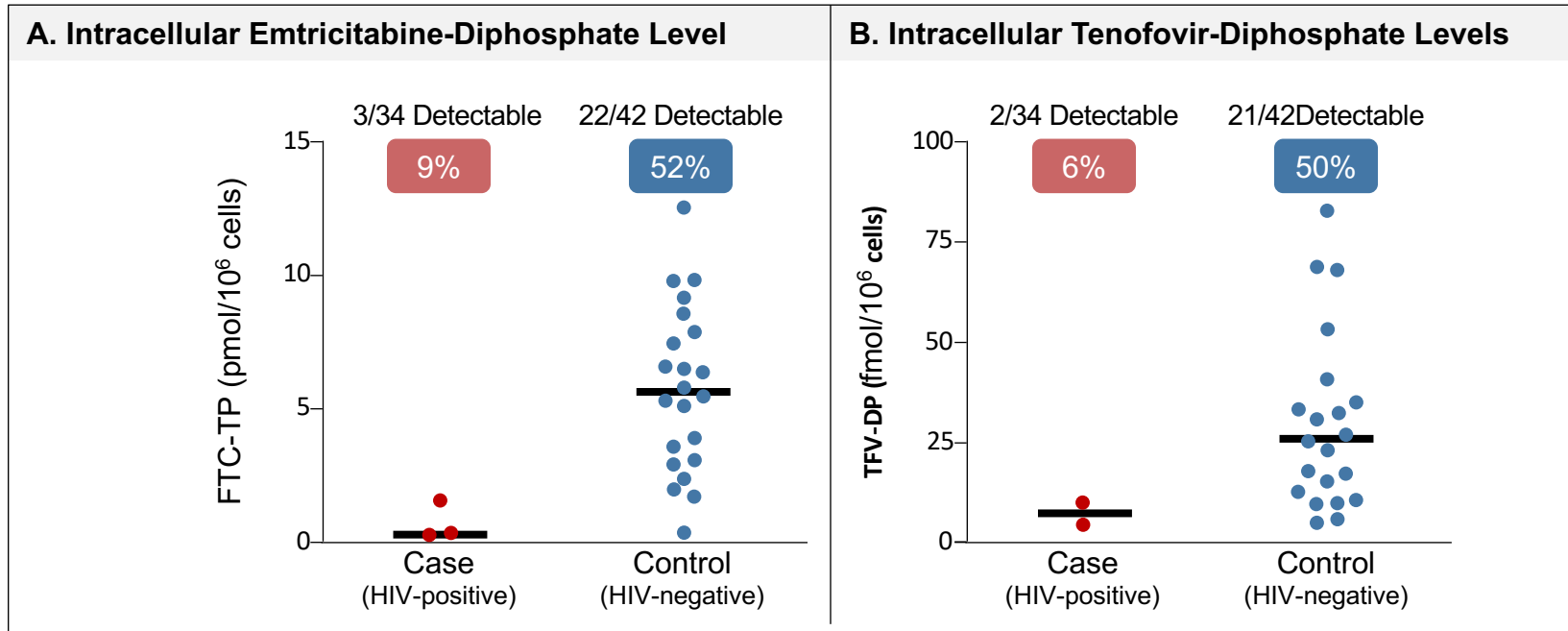
Risk Reduction Compared with Placebo: Modified Intent-to-Treat Analysis



Source: Grant RM, et al. N Engl J Med. 2010;363:2587-99.

# TDF-FTC versus Placebo as HIV PrEP for MSM and TGW iPrEx Trial: Results

## Detectable Drug Levels in Patients on Tenofovir DF-Emtricitabine



Adjusted relative risk reduction (any detectable level) = 95%

# TDF-FTC versus Placebo as HIV PrEP for MSM and TGW iPrEx Trial: Conclusions

**Conclusions:** “Oral tenofovir DF-emtricitabine provided protection against the acquisition of HIV infection among the subjects. Detectable blood levels strongly correlated with the prophylactic effect.”



# Acknowledgments

The **National HIV Curriculum** is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$1,021,448 with 0% financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit [HRSA.gov](http://HRSA.gov). This project is led by the University of Washington's Infectious Diseases Education and Assessment (IDEA) Program.

