Same Day (Rapid) Start for HIV PrEP

Sarah E. Rowan, M.D.
Denver Prevention Center Clinical Faculty
Public Health Institute at Denver Health
Associate Professor of Medicine – Infectious Disease
University of Colorado, Anschutz Medical Campus

August 29, 2023





Disclosures

No Disclosures



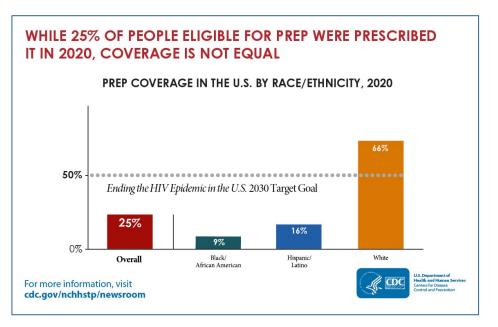
Overview

- Why Consider Rapid PrEP Starts
- Evidence
- Key Considerations
- Logistics





Why Same Day (Rapid) Start for PrEP?



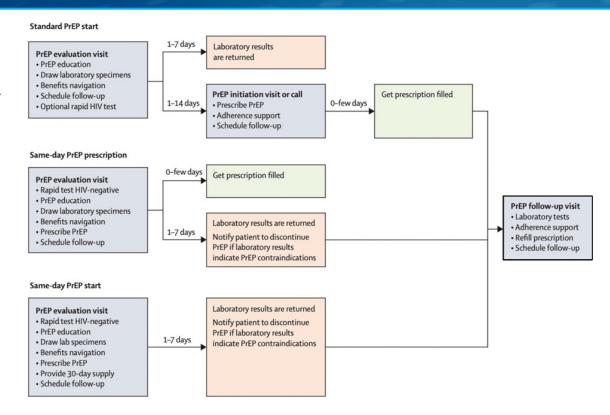
- Only 25% of the 1.2 million individuals in U.S. who could benefit from PrEP are taking it.
- PrEP use overall has increased but significant inequities in PrEP use remain.





Why Same Day (Rapid) Start for PrEP?

- Delays and extra steps while obtaining PrEP may lead to attrition and fewer new starts or restarts.
- Rapid Start PrEP decreases barriers to uptake and increases the likelihood that someone will start PrEP.
- Rapid PrEP shortens the time an individual is susceptible to HIV.









Caveats for Same-Day Start for PrEP



Not indicated yet for injectable PrEP



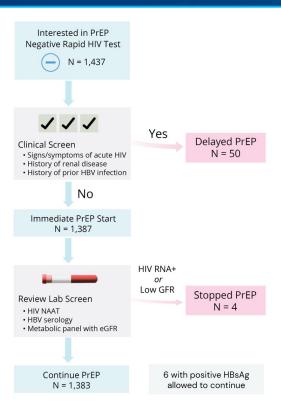
Not studied for 2-1-1 PrEP, but likely applicable if hep B status is negative







New York City Experience



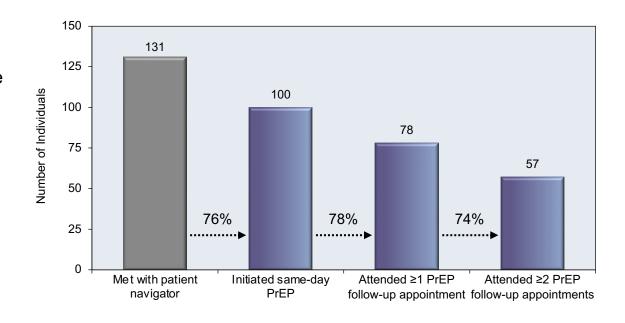
- Individuals offered Same-Day PrEP if they had a negative rapid HIV test and did not meet any criteria for Delayed PrEP.
- Only 4 of 1,387 individuals who received Same-Day PrEP were advised to stop PrEP due to a positive HIV test or low GFR.
- Among the individuals assigned to delayed PrEP, only 35% of those without medical contraindications (15 individuals) started PrEP within 60 days of the initial visit.





Denver Experience

- Individuals with indications for PrEP who received care in the Denver Sexual Health Clinic were offered a 30-day PrEP starter pack if no contraindications to same-day PrEP were identified.
- 57% of those who started Same-Day PrEP attended at least 2 PrEP follow-up visits.



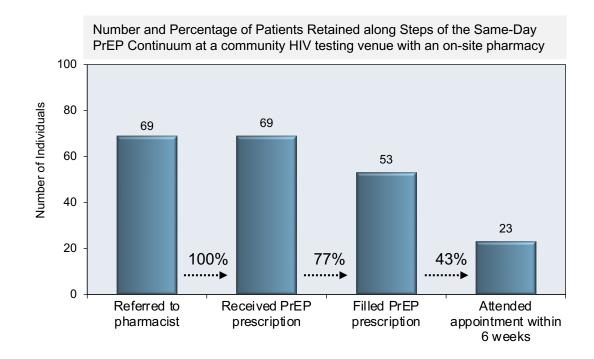






Other Sites with Same Day PrEP models

- Washington University in St. Louis
 adult infectious diseases clinic
- Howard Brown Health Centers network of FQHCs in Chicago, IL
- Jackson, MS pharmacy-led program at an HIV testing site
- Seattle & King County Public Health Sexual Health Clinic







Definitions



Standard HIV PrEP: When a person is evaluated and an HIV PrEP prescription is provided after laboratory results have returned, typically within 7 days of initial visit.



Same-day HIV PrEP Prescription: When HIV PrEP is prescribed the same day of the initial visit, but the person does not start PrEP medications until the initial HIV test results have returned.



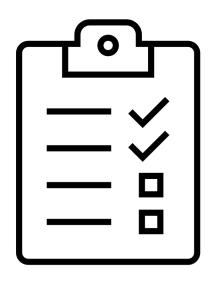
Same-day HIV PrEP Start: When HIV PrEP is prescribed the same day of the initial visit and the person initiates PrEP that day, either by picking up the medication at a pharmacy or through a clinic-dispensed starter-pack.







Requirements





Point-of-care HIV testing*



Ability to draw blood for creatinine, HIV, & hepatitis B



Ability to write prescription



Plan for referral to ongoing PrEP care



Support for enrollment in payment assistance programs







^{*}not necessary if negative HIV test in the prior 7 days; oral swabs not acceptable for Same-Day PrEP starts

Optional/Preferred Elements



Ability to screen for STIs and hepatitis serologies

Chlamydia

Gonorrhea

Syphilis

Hep C antibodies and RNA

Hep B antibodies



Ability to prescribe Post-Exposure Prophylaxis if indicated







Contraindications to Same Day PrEP



Acute HIV symptoms



History of renal disease



Inability to get blood drawn that day (unless recent labs available)



No contact info for follow-up



No mechanism for coverage of PrEP prescriptions



Caution

History of Hep B (stopping PrEP could lead to Hep B flare) Risk factors for renal disease







Possible Settings

Community Health Centers

Sexual Health Clinics

Syringe Service Providers

Pharmacies

Others















Tests for Same Day PrEP

Tests required prior to prescribing Same Day PrEP

- Rapid HIV (ideally 4th generation)
- Urine pregnancy (if needed)

Tests to be ordered and drawn (but not resulted) prior to prescribing PrEP

- Lab-based 4th generation HIV test
- Creatinine
- Hep B surface antigen

HIV-1 RNA assay if any of the following

- Patient has taken oral PrEP or PEP in past 3 months
- Patient has received cabotegravir injection in past 12 months
- Patient has symptoms that suggest acute HIV

Optional additional tests

- Syphilis, GC/CT (all relevant sites)
- Hepatitis B and C serologies







Logistical Considerations

Dispense 30-90 pills

Follow up in 4-6 weeks, in person or remote





Audiovisual Acknowledgement

The production of this **National HIV PrEP Curriculum** presentation is supported by grant U62PS924588 from the Centers for Disease Control and Prevention (CDC) and U10HA32104 from the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS). Its contents are solely the responsibility of University of Washington IDEA program and do not necessarily represent the official views of CDC, HRSA, or HHS. This project is led by the University of Washington Infectious Diseases Education and Assessment (IDEA) Program.





