

# Anticipated and actual reasons for discontinuing PrEP among gay and bisexual men reflect everyday concerns in addition to perceived HIV risk: Implications for service provision and health promotion

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## Background:

Now that many barriers to accessing pre-exposure prophylaxis (PrEP) in Australia have been removed, there is increasing interest in the reasons people discontinue PrEP after having started.

## Methods:

In-depth interviews were conducted face-to-face with 59 participants from two PrEP demonstration studies in Victoria (2014–2018). This analysis focuses on participants' responses to questions about: 1) the reasons they anticipated stopping PrEP at some point *in the future*; and 2) any *actual* experiences of discontinuing, or suspending, PrEP use.

## Results:

All 59 participants were gay or bisexual men, including 2 trans men. Entering a new relationship was the reason most men anticipated discontinuing PrEP. Although stopping PrEP in this context was usually imagined as being preceded by detailed discussions (about trust and/or 'monogamy'), participants who had actually discontinued PrEP due to entering a relationship often described this decision as sudden, even when undertaken with clinical support.

Concerns about side-effects and/or toxicity were also important, and could also lead to stopping PrEP without clinical support. These concerns, highlighted in particular by younger participants, were related to specific aspirations or aspects of their lives (e.g. intention to be a sperm donor, or participation in contact sports).

Other considerations of discontinuing PrEP were also framed in terms of imagined futures, including futures that were considerably remote from the present (e.g. decreased sexual activity due to: ageing and decreased sexual interest/desirability).

Finally, for a small minority of participants, PrEP represented a sense of control that was otherwise unobtainable (and extended beyond HIV prevention). Examples included participants who had issues related to anxiety, and those who were concerned about their drug consumption.

## Conclusion:

These findings provide useful insights for service provision and health promotion interventions. Reframing PrEP in ways that correspond to the concerns of users is vital in supporting patients to anticipate discontinuation, and to prevent unintentional breaks.

**Disclosure of Interest Statement:**

*No interests to disclose.*