

ASHM PrEP Guidelines 2019 Update

Developing a sustainable HIV, viral hepatitis, and sexual health workforce

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On behalf of the ASHM PrEP Guidelines Panel



ASHM PrEP Guidelines Panel

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Guideline review process

- 9 month process commenced at end of 2018.
- Each chapter reviewed and re-written by a small group of subject matter experts, to update according to latest evidence.
- Each re-written chapter then reviewed by the broader guidelines panel who comprised:
 - Clinicians
 - Researchers
 - Representatives of relevant community organisations and priority groups



HIV risk stratification

- The 2019 ASHM PrEP guidelines no longer stratify a person's risk of HIV acquisition as high or medium, instead collapsing these into a simplified "HIV risk".
- As previously, individuals may be suitable for PrEP if they report risk in the previous 3 months and perceived risk in future 3 months.
- Now recommend offering PrEP to people who only report perceived future HIV risk in the future 3 months.
 - E.g., people who normally have low HIV risk but are about to go travelling
- Now strengthened the previous recommendation that PrEP is recommended for people whose quality of life is likely to improve if they are offered PrEP
 - E.g. people with high anxiety about HIV acquisition



HIV Risk Stratification-Parallel Chapter 4

- ASHM 2019 PrEP guidelines provide a parallel chapter to assess PrEP suitability that is written for clinicians who are knowledgeable about transgender terminology and concepts.
- This chapter hopes to foreshadow a future where sexual health guidelines do not need to provide separate advice for trans and gender diverse people.
- For example Parallel Chapter 4 discusses PrEP suitability for MSM and includes trans-gender MSM in this section.
 - Hence MSM section discusses both anal and vaginal sex



PrEP Suitability

- 2019 guideline update aimed to further remove barriers to PrEP access.
- Language changed from "PrEP eligibility" to "PrEP suitability".
- People who request PrEP are typically at high risk of HIV, and they should not be dissuaded from using PrEP.
- PrEP suitability criteria are not intended to limit or deny access to PrEP to any person who seeks it. Instead, they are intended to assist clinicians in their discussions about PrEP with patients who are not certain about whether to commence PrEP.
- All clinicians should routinely take a sexual history, and should actively recommend PrEP if this history indicates a HIV risk.



PrEP for Adolescents

- Guideline highlights that PrEP can be prescribed offlabel to adolescents, after obtaining informed consent, who can then import PrEP using the Personal Importation Scheme.
- Adolescents may need more intensive support to maintain PrEP adherence. This may require more frequent clinical visits.



Indications for PrEP

Overall, epidemiological data highlight the need to strengthen the current strategies for HIV prevention especially in:

- Indigenous populations
- Overseas-born MSM
- Heterosexuals
- Transgender men and women
- Adolescent MSM

Public health effort needed to promote PrEP uptake in these populations.



On-Demand PrEP

Strong interest in on-demand PrEP among Australian PrEP users (48% in recent survey data).

The 2019 ASHM PrEP Guidelines Panel endorses WHO's recommendation that on-demand PrEP should be offered to <u>cis-gender MSM</u>.

On-demand PrEP is suitable for cis-gender MSM who:

- Have a preference for this regimen
- Have at-risk sex less than twice per week
- Can predict when they may have at-risk sex, or can delay at-risk sex for two hours.



Not Suitable for On-Demand PrEP

- Efficacy of on-demand PrEP not yet determined in other populations (cis-gender and transgender women, transgender men who have vaginal sex, men who have sex with women).
- Caution to be used in recommending on-demand PrEP to adolescent cis-MSM because there have been no trials of on-demand PrEP in adolescent MSM and because adherence rates to daily PrEP have been consistently low in studies of adolescent MSM
- On-demand PrEP is contraindicated in people with chronic hepatitis B infection



Initiation of PrEP

- Cis-MSM can initiate with a double dose 2-24 hours before sex, either for on-demand or daily dosing, in line with WHO recommendation.
- Ongoing recommendation that other PrEP-users should be advised that high-level protection is achieved after 7 daily PrEP doses.



Cessation of PrEP

- Agree with the WHO's recent recommendation that cis-MSM who take either daily or on-demand PrEP can safely cease PrEP by taking a dose of Prep 24 and 48 hours after their last at-risk sexual exposure.
- For all other PrEP users, continue to recommend that they take 28 days of PrEP after their last at-risk sexual exposure.
- During discussion of PrEP cessation, clinicians must also advise patients how to safely re-commence PrEP if their HIV risk increases.



Broader Review Committee

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ASHM PrEP guidelines

- New ASHM PrEP Guidelines launched at HIV conference
- 96-page document
- URL; https://ashm.org.au/resources/hiv-resources-list/

