

HIV pre-exposure prophylaxis (PrEP) use among men-who-have-sex-with-men with newly diagnosed HIV infection.

Shapiro J^{1,4}, Zablotska I^{1,2}, Lewis DA^{1,2}, Richardson D^{1,3}, on behalf of the Western Sydney Sexual Health Centre PrEP Research working group

1. Western Sydney Sexual Health Centre, Western Sydney Local Health District, Parramatta, New South Wales 2150, Australia
2. Westmead Clinical School, Faculty of Medicine and Health & Marie Bashir Institute for Infectious diseases and Biosecurity, University of Sydney, Westmead, New South Wales 2145, Australia
3. Brighton & Sussex University NHS Trust, Brighton & Sussex Medical School, East Sussex, UK
4. Kirketon Road Centre, Kings Cross, Sydney, New South Wales 2011, Australia

Background:

While HIV pre-exposure prophylaxis (PrEP) is widely available and government-subsidised in Australia, decrease in HIV incidence has been modest. It is unclear why many men-who have-sex-with-men (MSM) at risk for HIV have not yet commenced PrEP, have taken it inconsistently or stopped PrEP. Among MSM attending Western Sydney Sexual Health Centre who were diagnosed with HIV, we assessed missed opportunities and barriers to PrEP uptake and adherence.

Methods:

We identified 31 MSM diagnosed with HIV between January 2018 and December 2019 and retrospectively reviewed their files for sexual practices, patterns of and barriers to PrEP use. As this sample is statistically small, we report raw numbers.

Results:

All 31 seroconverters were at high HIV risk due to sexual practices prior to seroconversion, but only 11 had discussed PrEP with clinicians; just 5 initiated PrEP but used it inconsistently, while 6 chose to not take it at all. Two of 5 inconsistent users (2/5) ran out of medication; 1/5 could not afford it; 1/5 perceived himself no longer at risk; 3/5 identified as heterosexual and perceived low risk. None was using PrEP at the likely time of acquisition, but all had high-risk practices and 4/5 used recreational drugs. Of note, 26 MSM diagnosed with HIV had never requested or used PrEP despite being eligible: 15/ 26 were non-Australian born, 8/26 used recreational drugs and 7/26 reported sex with women.

Conclusion:

This analysis highlighted missed HIV prevention opportunities and identified some of the remaining issues in PrEP roll-out, which should be prioritised. Interventions are needed to better identify MSM with perceived or actual barriers to PrEP access (MSM of CALD backgrounds, identifying as heterosexual, using recreational drugs). HIV prevention strategy should also focus on eliminating missed prevention opportunities among MSM non-adherent or discontinuing PrEP.

DISCLOSURE OF INTEREST STATEMENT:

There are no conflicts of interest to disclose.