

HIV PREVENTION: Pre-exposure Prophylaxis (PrEP) Implementation

Charlene Flash, MD MPH
Baylor College of Medicine

From Research to the Real World: Sharing Science Symposium
April 22, 2014

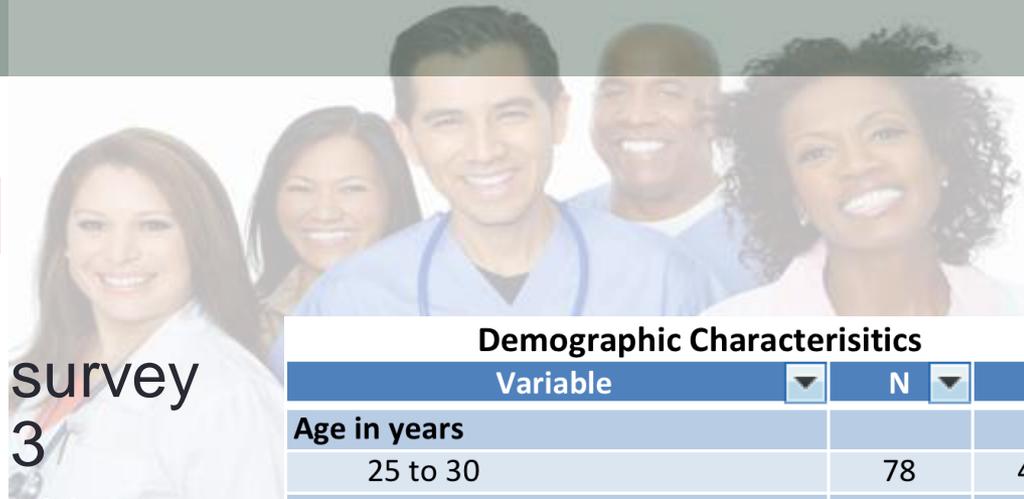
Why We Did this Study

- Pre-exposure prophylaxis (PrEP) :
 - High risk people using a part of an HIV drug cocktail on a daily basis to prevent HIV.
- Truvada® : only FDA approved drug
 - Once daily tablet
 - co-formulated tenofovir disoproxil fumarate 300 mg (TDF) and emtricitabine (FTC) 200 mg
- 44 to 67% effective in clinical trials
 -If taken perfectly 92% effective
- PrEP uptake requires providers to be
 - knowledgeable
 - willing to prescribe or refer



What We Did

- Anonymous on-line survey
January to April 2013
 - Conducted among health care providers in Harris Health System (HHS)
 - largest network of public primary care providers in TX.
 - 22 locations staffed by BCM and UTHealth
 - Thomas Street Health Center -> primary care for HIV infected patients.
- 210 providers
 - Mean age - 36
 - 63% female, 48% white

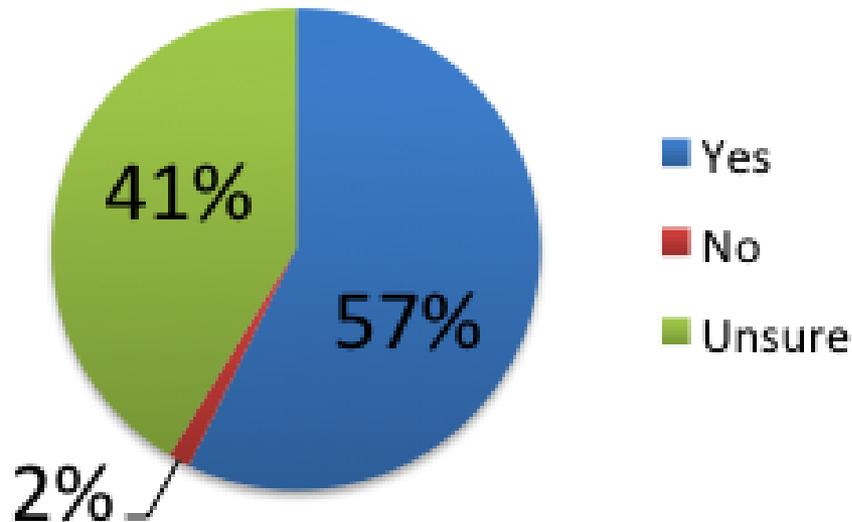


Demographic Characteristics

Variable	N	%
Age in years		
25 to 30	78	41.7
31 to 40	59	21.9
41 to 50	34	18.2
51+	16	8.5
Gender		
Male	75	36.7
Female	129	63.2
Transgender	0	0
Ethnicity		
Hispanic/Latino	21	10.5
Not Hispanic/Latino	180	89.5
Race		
Asian	67	35
American Indian/Alaskan Native	1	0.5
Black/African American	26	13.2
Native Hawaiian/ Other Pacific Islander	1	0.5
White	94	47.7
Other	8	4.1

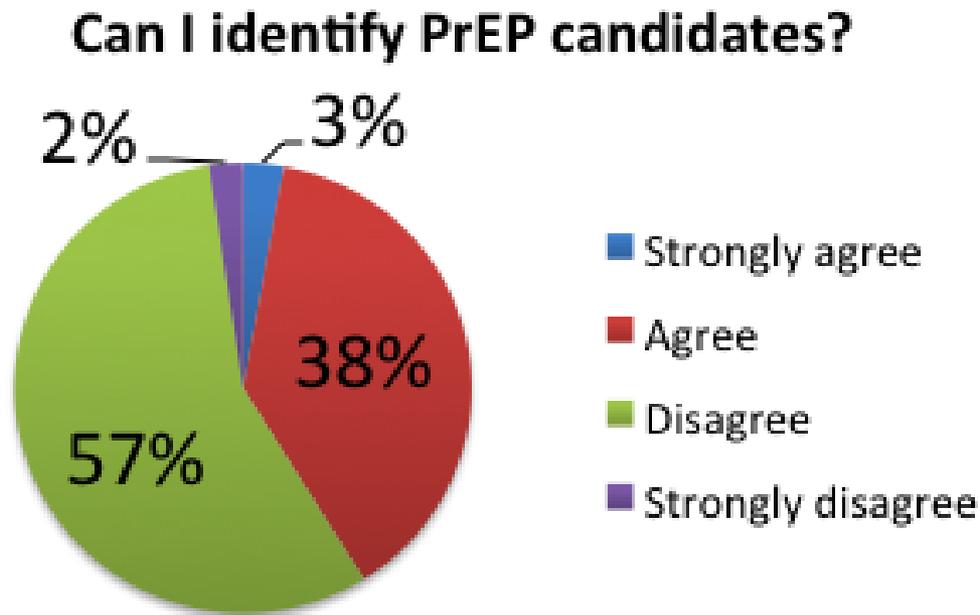
What We Found

Is PrEP safe?



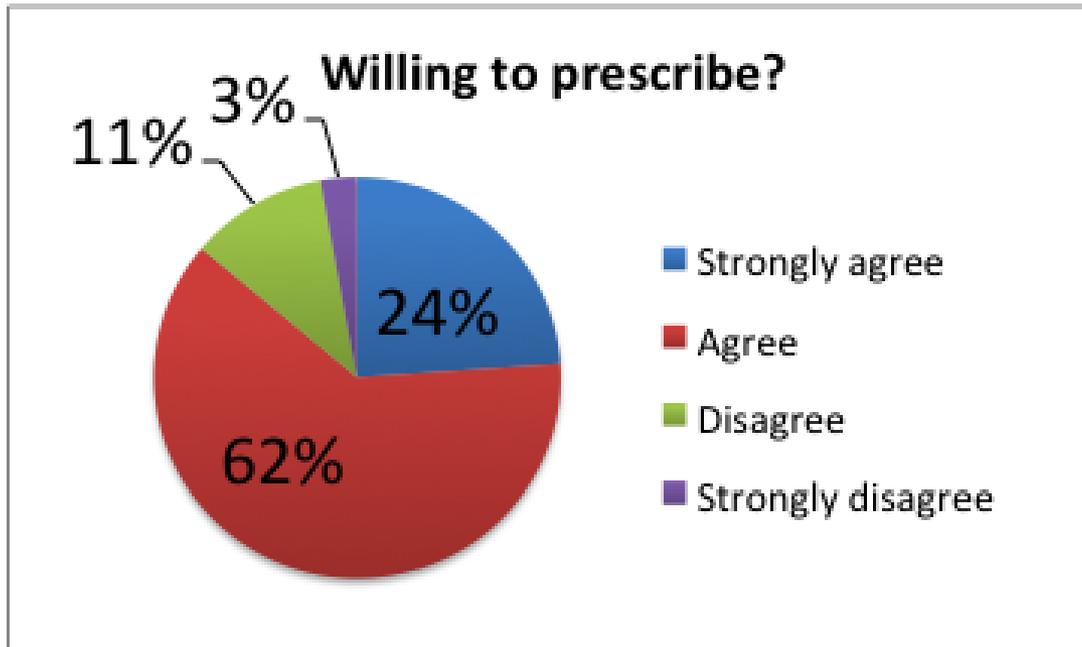
- HIV specialists
 - had 7.4 times greater odds of agreeing that PrEP is safe and effective ($p=.002$), compared to other providers.

What We Found

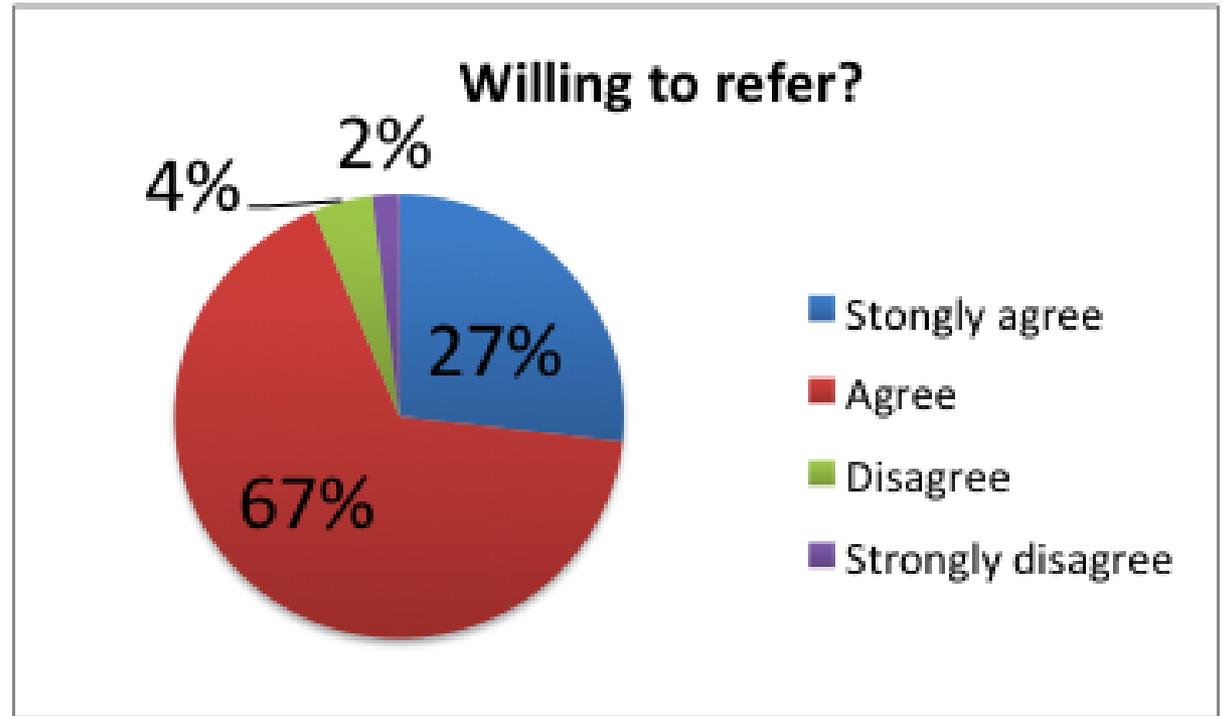


- HIV specialists
- 4 times greater odds of being confident in their ability to identify patients who needed PrEP than other providers (p=0.003).

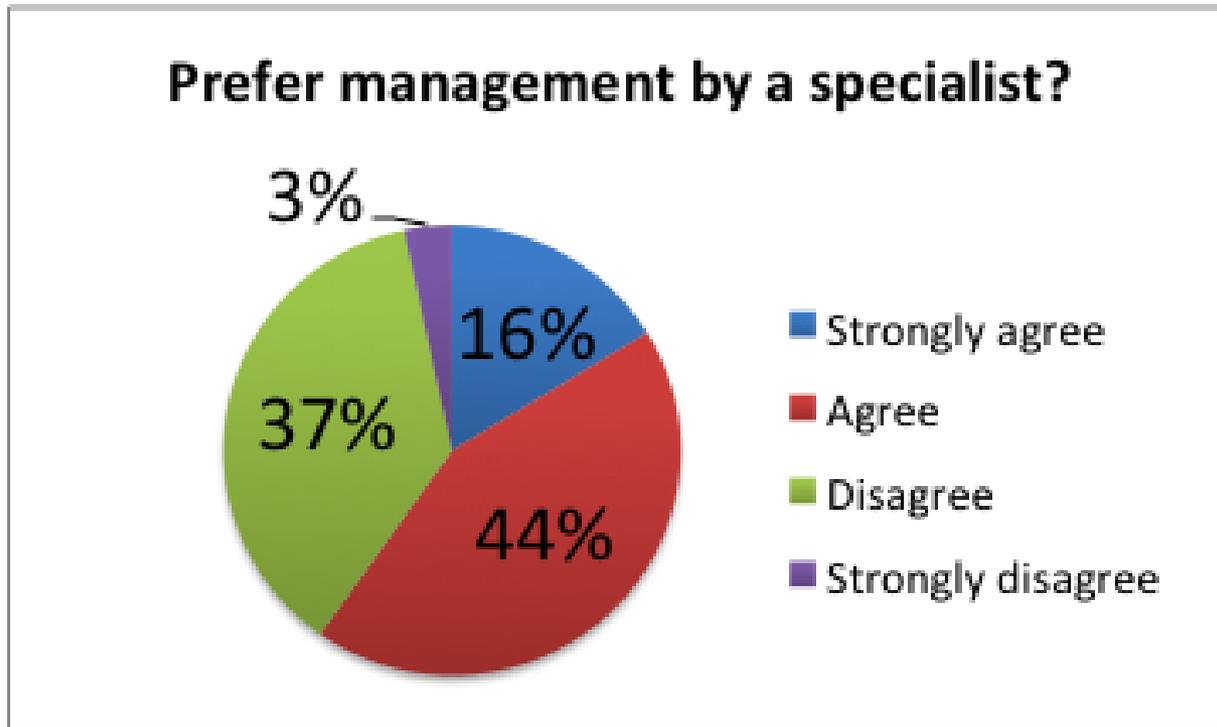
What We Found



What We Found



What We Found



What Our Results Mean and Why this Matters

- These findings highlight the need for additional training for primary care providers to enhance
 - Knowledge of PrEP safety and effectiveness
 - Ability to identify potential candidates
 - Confidence in PrEP prescribing/referral
 - Willingness to engage patients in the use of PrEP
- Only 18% of providers had received a patient inquiry about PrEP, 80% would be motivated to prescribe PrEP by patient requests.

Acknowledgments

Research Mentors

- Thomas P. Giordano, MD
- Kenneth H. Mayer, MD

Collaborators

- Monisha Arya, MD
- Douglas Krakower, MD
- Matthew Mimiaga, MD PhD
- Micha Zheng

Statistician

- Amber B. Amspoker, PhD

Research Coordinators

- Carmen Avalos
- Elizabeth Frost

Thomas Street Health Center clinicians, staff and patients

- Thomas Street Prevention Clinic Team

Study participants

Funder

- BCM/UTHouston CFAR