



Pre Exposure Prophylaxis (PrEP)

for INPUD consultation on values and preferences of people who inject drugs

What is Pre exposure Prophylaxis (PrEP)?

Pre-exposure prophylaxis (PrEP) is the use of antiretroviral medications by an HIV-negative person to prevent getting HIV. Several studies have shown that PrEP reduced HIV transmission among serodiscordant heterosexual couples, men who have sex with men, transgender women, high-risk heterosexual couples, and people who inject drugs (PWID). People who took PrEP every day were significantly less likely to get infected with HIV. Similar to antiretroviral therapy and other medications, adherence to PrEP is critical to efficacy and successful implementation. Studies have also shown that PrEP is safe and causes few, minor side effects in some people who take it. PrEP does not protect against other sexually transmitted infections or other problems associated with sharing injecting equipment, like HCV infection, abscesses or endocarditis.

What do we know about PrEP for People who Inject Drugs?

A study conducted among people who inject drugs in Bangkok, Thailand showed an overall reduction of almost 50% among those who received PrEP, and a reduction of 74% for those who adhered best to taking the pill every day.ⁱ While the study demonstrated PrEP efficacy, many practical questions about the acceptability and feasibility of offering PrEP for PWID remain unanswered. These concerns are especially heightened in highly repressive regimes and human rights concerns about PrEP implementation in criminalised communities have been raisedⁱⁱ. Several aspects of PrEP delivery in the trial, participant compensation and direct observation of pill-taking, may not be practical for implementation in real-world settings. Concerns have also been raised regarding the conduct of the Bangkok trial, specifically, that sterile injecting equipment, the most effective HIV prevention intervention for people who inject drugs, was not provided to any participants.

Status of PrEP globally

PrEP is a new method for preventing HIV infection which has been approved for use in some countries. The United States Center for Disease Control recommends PrEP for high risk HIV negative men and women, at risk HIV negative men who have sex with men, and at risk HIV negative PWID as part of a comprehensive set of prevention services, accompanied by quarterly monitoring of HIV status, pregnancy status, side effects, medication adherence and risk behaviors. The CDC noted

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that PrEP delivery for PWID should be integrated with prevention and clinical care for additional health concerns (e.g. hepatitis B and C infection, abscesses, overdose). The European Medicines Agency (EMA) is in the process of developing a concept paper on PrEP. In 2012, based on the evidence available, WHO recommended that countries consider daily oral PrEP as an additional prevention strategy for HIV negative partners in serodiscordant couples^{iiiiv} as well as men and transgender women who have sex with men.^v WHO also called for demonstration projects to prove that oral PrEP could be implemented safely and effectively to achieve HIV prevention. No recommendation was made for people who inject drugs due to lack of evidence of PrEP safety and efficacy with this population at the time.

The World Health Organisation, in the recently released Consolidated Guidelines on HIV Prevention, Diagnosis, Treatment and Care For Key Populations concluded on the basis of systematic reviews of the scientific evidence, and also the review of benefits, harms, costs as well as values and preferences of the community of people who inject drugs that it should not recommend PrEP for people who inject drugs. INPUD is in the process of developing a position statement on PrEP, so that we can systematically review the evidence and the opinions and values of the community so that they can be taken into consideration in forming policy.

This consultation is one of the means that INPUD will use to assess the values and preferences of people who inject/use drugs related to PrEP.

ⁱChoopanya K. et al. Antiretroviral prophylaxis for HIV infection in injecting drug users in Bangkok, Thailand (the Bangkok Tenofovir Study): a randomized, double-blind, placebo-controlled phase 3 trial. *Lancet* 2013;381:2083-90

ⁱⁱⁱIn this guidance couples are defined as two persons in an on-going sexual relationship, and no distinction is made

^{iiiiv}In this guidance couples are defined as two persons in an on-going sexual relationship, and no distinction is made between heterosexual and same-sex couples.

^vWHO. Guidance on pre-exposure oral prophylaxis (PrEP) for serodiscordant couples, men and transgender women who have sex with men at high risk of HIV: Recommendations for use in the context of demonstration projects. Geneva, 2012. http://www.who.int/hiv/pub/guidance_prep/en/