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# HIV Treatment as Prevention (TasP)

*Last updated: May 24, 2021*

*Together, we can change the course of the HIV epidemic...one woman at a time.*

#onewomanatatime

[www.thewellproject.org](http://www.thewellproject.org)

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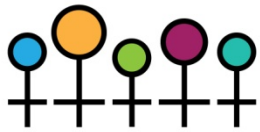
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# What Is Treatment as Prevention?

*Treatment as prevention (TasP):* using HIV treatment to **lower the risk of transmitting HIV**

- For people living with HIV:
  - Taking HIV drugs can reduce viral load, which means:
    - Less likely to transmit HIV to others
    - *Unable* to transmit HIV through sex (U=U)
    - Feel better because they have a healthier immune system

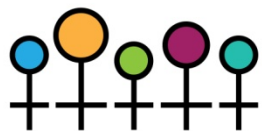




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# TasP to Prevent Perinatal Transmission

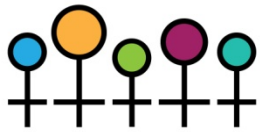
- In the 1990s, research showed pregnant women living with HIV who used **zidovudine** (Retrovir or **AZT**) greatly reduced risk of transmitting HIV to their babies
- Now standard practice to:
  - Test pregnant women for HIV
  - Provide HIV drugs to women with HIV during pregnancy, delivery, breastfeeding
  - Give HIV drugs to babies of women with HIV
- With HIV treatment and undetectable viral load, a woman's chance of transmitting HIV to her baby can be less than 1 in 100
- Called **preventing mother-to-child transmission** (PMTCT) in many parts of the world (term considered stigmatizing to many); also known as **preventing perinatal** or **vertical transmission**



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# TasP in Sexually Active Adults

- TasP can help **mixed-status couples** safely conceive
- **PrEP** can also help keep HIV-negative partner negative
- **2011 HTPN 052 study:** HIV treatment and undetectable viral load -> little chance of transmission to HIV-negative partner in mixed-status couple
  - Even when partner living with HIV had no HIV-related symptoms and CD4 count between 350-500 cells/mm<sup>3</sup>
- **2016 PARTNER study:** No transmission if partner living with HIV has undetectable viral load (**U=U**)

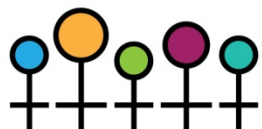


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# Treatment with a Public Health Twist

## HPTN 052 *changed HIV prevention*

- Additional tool – treatment – in prevention toolbox
- How it works from **public health** (vs. individual health) point of view:
  - If enough people living with HIV could be treated so that their viral loads became undetectable
    - They would be much less likely to spread HIV
    - Number of new HIV cases would drop remarkably
    - Called a drop in **community viral load**

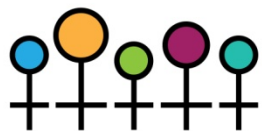


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# Treatment with a Public Health Twist

## Test and treat strategies:

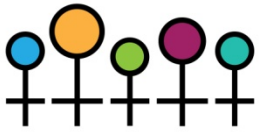
- Recommend universal HIV testing to identify, then treat, all people living with HIV (millions more than now get treatment)
  - Whatever their CD4 counts or viral loads
- Would require greatly expanded medical services
- Resource-limited countries may not be able to take on these additional public health tasks
  - Ethical concerns about who receives limited supplies of medical services and HIV drugs – those who need them for treatment, or those who need them for prevention, or both?



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# Treatment with a Public Health Twist

- ***How well TasP works can vary*** depending on factors including:
  - Health care systems' ability to provide testing, linkage to care, HIV drugs
  - Willingness, ability of people to get tested for HIV
    - HIV-related stigma, discrimination make people less likely to get tested
  - Willingness, ability of people living with HIV to adhere to HIV drug regimens so they remain virally suppressed



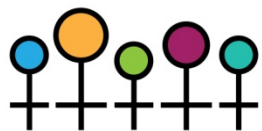
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# Other Methods for Preventing HIV

## *For HIV-negative people:*

- **PrEP (Pre-Exposure Prophylaxis)**
  - Taking drugs before exposure to prevent disease
  - HIV-negative people taking HIV drugs to reduce their risk of getting HIV if exposed to the virus
    - Especially helpful for HIV-negative women who want to get pregnant and whose male partners are living with HIV
    - Promising tool women can use to ***prevent HIV without partners' knowledge or cooperation***



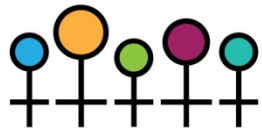


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# Other Methods for Preventing HIV

## *For HIV-negative people:*

- **PEP (Post-Exposure Prophylaxis)**
  - Taking HIV drugs for +/- 1 month after possible HIV exposure (needle-stick, sex without condom, sexual assault)
  - To be effective, PEP must be taken right away – within first 72 hours after exposure to HIV, if possible

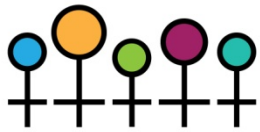


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## In Conclusion

Research continues to show ***TasP can be a game-changer*** in the course of HIV pandemic

TasP can not only positively affect **health of those living with HIV**, but also **protect those who are not living with HIV**  
***Undetectable = Untransmittable***



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## Learn More!

- To learn more, and for links to articles featuring more details, please read the full fact sheet:
  - [HIV Treatment as Prevention \(TasP\)](#)
- For more fact sheets and to connect to our community of women living with HIV, visit:
  - [www.thewellproject.org](http://www.thewellproject.org)
  - [www.facebook.com/thewellproject](https://www.facebook.com/thewellproject)
  - [www.twitter.com/thewellproject](https://www.twitter.com/thewellproject)