PrEP for Women

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

#onewomanatatime

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What Is PrEP?

*PrEP* stands for Pre-Exposure Prophylaxis:

*Prophylaxis*: Taking medicine *before* being exposed to something, to prevent yourself from getting a disease or condition

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What Is PrEP?

We use several kinds of medicine this way:

- **Taking anti-malaria medication** when we travel to areas where we might be bitten by mosquitoes that carry malaria
  - When medicine is in a person's body before getting a mosquito bite, (s)he is much less likely to get malaria when bitten
- For women, **taking birth control pills (contraceptives)**
  - Chances of pregnancy greatly reduced when contraceptives are already in a woman's body when exposed to semen during sex
- PrEP here: HIV-negative women **take an HIV drug to reduce their risk of acquiring HIV** if they are exposed to the virus

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How Does PrEP Prevent the Spread of HIV?

- CD4 cells infected with HIV become little factories that make thousands of new viruses each day
  - HIV drugs work by blocking HIV from making copies of itself
- If an HIV-negative woman already has HIV drugs in her bloodstream when she is exposed to HIV, e.g., during sex without condoms:
  - Medicine might be able to keep the HIV from making enough copies of itself to "take hold"
  - May prevent her from getting HIV
Approval for Daily Oral PrEP

**July 2012**: U.S. Food and Drug Administration (FDA) approved daily Truvada (tenofovir disoproxil fumarate + emtricitabine, or TDF/FTC) as PrEP for sexually active adults at risk of getting HIV
- Truvada often used as part of combination HIV drug treatment
- First time FDA has approved any drugs for prevention of HIV

**June 2016**: World Health Organization (WHO) released updated guidelines recommending daily oral PrEP be offered as additional prevention method to all people at substantial risk of HIV
- WHO approves either Viread (tenofovir/TDF) or Truvada for daily oral PrEP
- Each country must approve PrEP separately

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Has PrEP Been Shown to Be Effective?

• **Efficacy shown**
  • 3 studies among MSM, trans women, heterosexual men and women: 44-73% extra protection against HIV
  • But: 2 studies: not effective
  • Highly effective as “bridge” for serodiscordant couple until partner living with HIV has undetectable viral load

• Current trials among women focus on topical PrEP
Why Are Some Research Findings Unclear?

For HIV prevention tools (condoms, PrEP, etc.) to work, they *have to be used – correctly and consistently*

- Studies that showed benefit had **much higher rates of adherence**
- Reasons for non-adherence, especially among women, not fully understood
- **Need for women to participate in studies** to understand adherence issues
Why Are the Research Findings Unclear?

• Reasons why people – especially women – had low levels of adherence to oral PrEP is not yet fully understood.

• Very important to do more research looking at what issues might affect women's interest in or ability to take a drug for HIV prevention.

• Also important for women to know about and take part in future research that will look at unanswered questions about PrEP.

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CDC Guidelines for PrEP Use

May 2014: CDC released updated guidelines for PrEP use in U.S.

- Recommend PrEP with daily, oral Truvada be considered for HIV-negative people who are at substantial risk for HIV, including people who:
  - Are in a sexual relationship with a partner living with HIV
  - Don’t regularly use condoms/don’t know HIV status of sexual partner(s)
  - Have high number of sexual partners
  - Are engaged in commercial sex work
  - Have had recent bacterial sexually transmitted disease
  - Use injections drugs and
    - Share drug equipment, or
    - Were recently in a drug treatment program

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CDC Guidelines for PrEP Use

• Some reasons *PrEP is not recommended*; having
  – Unknown HIV status (it’s important that only people who test negative for HIV take PrEP)
  – Signs or symptoms of acute HIV infection
  – Decreased kidney function
  – Unknown hepatitis B status and/or vaccination status

• Guidelines suggest providers consider PrEP for people in areas or personal networks where HIV is more common, offer tools to help providers identify these areas
CDC Guidelines for PrEP Use

- **To provide high-level protection**, PrEP needs to be used with other HIV prevention strategies (condoms, safer injecting practices)
  - Not intended to be used alone
  - Not proven 100 percent effective

- Everyone prescribed Truvada as PrEP must have negative HIV test
  - CDC recommends people on PrEP be tested every 3 months to make sure they remain HIV-negative

- WHO recommends tenofovir or Truvada be offered to all people at substantial risk of HIV
The PrEP Debate

Many believe it’s a good addition to the prevention toolbox, but others disagree.

Concerns about PrEP
- HIV-negative people may not adhere; PrEP won’t be effective
- PrEP will be used in place of condoms or other safer sex measures

Advantages of PrEP
- PrEP can be taken without agreement or knowledge of one's sex partner
- Research has not shown that using PrEP has reduced use of condoms/other safer sex methods
The PrEP Debate

Concerns about PrEP

• Possible side effects
  – Most common: nausea and vomiting
• Occasional serious side effects of Truvada
• Potential for developing resistance

Advantages of PrEP

• Most effects occur among people taking new HIV drug; often go away quickly
• No serious side effects found during PrEP studies
  • Small decrease in bone mineral density in men and transgender women in recent PrEP study

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What Does PrEP Mean for Women?

We now have evidence that PrEP works to prevent getting HIV if taken as prescribed, but *much more work needs to be done* before PrEP can be widely used and accepted

- **Improving health care systems** so people can access and afford PrEP
- Making HIV testing *more widely available*
  - Only people who know they are HIV-negative can use PrEP safely
PrEP is a promising tool that women can use to prevent HIV without their partners' cooperation.

Many questions remain:
- How will taking PrEP affect pregnancy and breastfeeding?
- How will women get tested, especially if their partners won’t?
  - Will they be able to get PrEP if they don’t know their partners' status?
- Will men refuse condoms if they know their partner is on PrEP?
- Will women be able to keep PrEP drugs given to them?
  - Some women worry drugs given to them might be taken away, given to another family member who "needs them more"
Questions to discuss with your provider:

• How often—and for how long—do I need to take PrEP? What happens if I miss a dose/several doses?

• What are Truvada's likely side effects and how will I manage them?

• How often will I need to be tested for HIV?

• How much will the drug cost me?
  – Will it be covered by my insurance?
  – Will HIV tests also be covered by my insurance?
Considering Taking Truvada as PrEP?

More questions to discuss with your provider:

• Do any of my current medical conditions make Truvada not a good choice?
• Do any of my other prescription medications, OTC drugs, street drugs, herbs, vitamins, supplements have interactions with Truvada?
• What should I do if I become pregnant while on PrEP?
New Developments in the PrEP Arena

• Tenofovir alafenamide (TAF)
  – Lower doses than TDF
  – Less bone loss; less reduction in kidney function
  – Approved for HIV treatment; PrEP study ongoing

• Maraviroc
  – No effect on bone or kidney health
  – Approved for HIV treatment; PrEP study ongoing

• Cabotegravir
  – Early-stage trials as possible long-acting injectable
• To learn more, and for links to fact sheet featuring more details, please read the full fact sheet:
  – **PrEP for Women**

• 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](http://www.facebook.com/thewellproject)
  – [www.twitter.com/thewellproject](http://www.twitter.com/thewellproject)