



Dr Rachel Drayton Cardiff Royal Infirmary

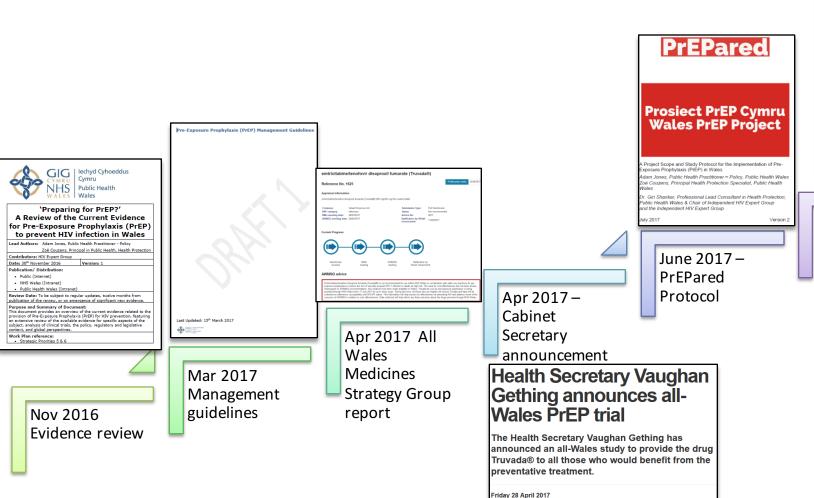


The Welsh experience

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Pecuniary declaration of interests - None



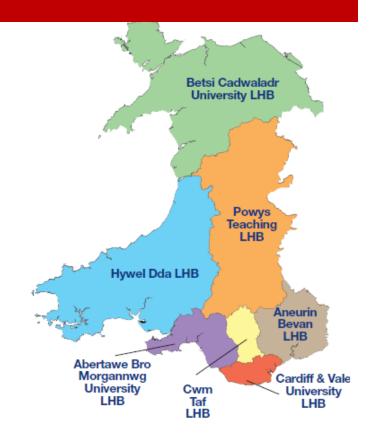
July 2017 – Operational guide and PrEP provision on the NHS

The detail

- Eligibility criteria:
 - Category 1 MSM engaging in condomless anal sex in last 3 months
 - Category 2 Partners of PLWH with detectable VL
 - Category 3 Heterosexuals with high risk partners
- 33 new clinical codes

The context

- Approx 4200 MSM attending annually:
 - Predicted 500 eligible
- Reimbursement drug and additional testing costs



Proposed clinic pathway

Identified as eligible

Routine care given e.g. STI testing, vaccines, treatment

If agrees to PrEP, eGFR and urinalysis Given PrEP clinic

appointment

Initial PrEP clinic

Further information given
HIV POCT
1 month PrEP given



STI testing
HIV POCT
Vaccines
Risk reduction
intervention
PrEP dispensed

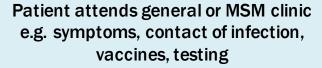
3 monthly reviews

STI testing

HIV POCT Vaccines

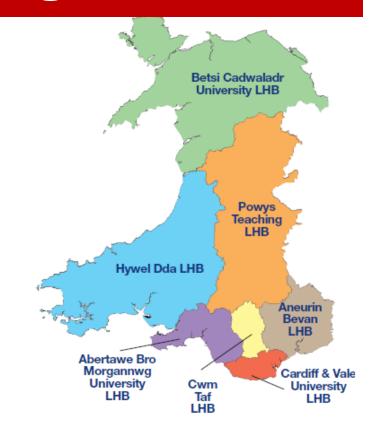
Risk reduction intervention

PrEP dispensed



The headline figures

- In first 9 months:
 - 378 eligible and 261 started
 - 98% category 1



Amended clinic pathway

Identified as eligible

Routine care given e.g. STI testing, vaccines, treatment

If agrees to PrEP, eGFR and urinalysis

Given PrEP clinic appointment

PrEP waiting list



Initial PrEP clinic

Further information given
HIV POCT

1 month PrEP given

1 month review STI exting

HIVAOCT

Vaccines

Risk reduction

Intervention
PrEP dispense

3 monthly reviews

STI testing
HIV POCT

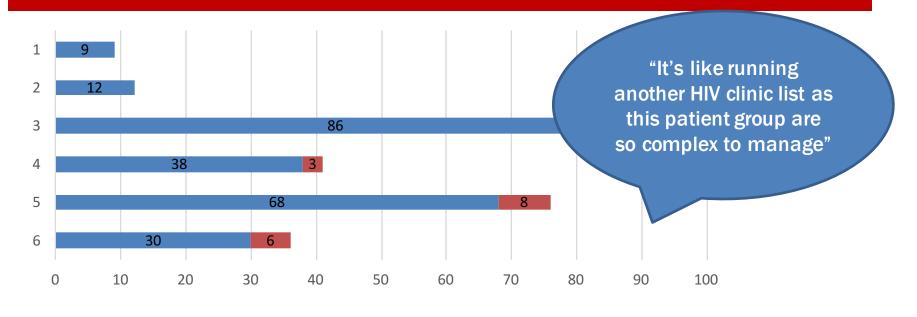
Vaccines

Risk reduction intervention

PrEP dispensed

Patient attends general or MSM clinic e.g. symptoms, contact of infection, vaccines, testing

Unexpected challenges



- Patients with standard monitoring
- Patients requiring additional renal monitoring

Impact on other services

Managing complex conditions e.g. HIV, syphilis ,GC

Testing and prevention in high risk and vulnerable groups

Complex contraception

Managing straightforward conditions e.g. chlamydia, warts

Testing and prevention in low risk groups

Straightforward contraception

Impact on other services

Managing complex conditions e.g. HIV, syphilis ,GC

Testing and prevention in high risk and vulnerable groups

Complex contraception

Managing — straightforward conditions e.g.
 chlamydia, warts

Testing and prevention in low risk groups

Straightforward contraception

How accurate will the data be?

- 3 out of the top 5 clinician concerns coding related
 - Time taken
 - Accuracy of those given PrEP and those not given PrEP

Are we collecting the right data?

 Large gradient of risk within eligibility category 1

> "Punishing men who are consistently using condoms by denying them PrEP"

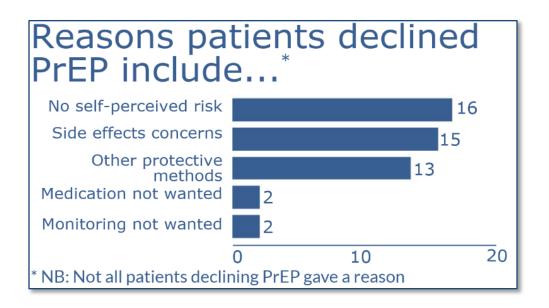
"Men are aware of the eligibility criteria and know what to say"

PrEP criteria for urgent prioritisation:

- > 5 partners in last month
 - > 2 partners in last month AND orted condom usage <50% work/chemsex/using las/cruising/group sex last 3 onths
 - Known HIV positive partner with detectable VL
- Diagnosed with rectal GC, CT, syphilis or HCV in last 3 months
- < 18 years old

Are we collecting the right data?

22% eligible patients declined PrEP



Looking forward

- Is PrEP provision sustainable in Wales without adequate funding?
- What will be the impact on other services provided?
- Is the current method of data collection adequate?
- Are we sure the eligibility criteria are right for our population?

Acknowledgements

 All the sexual health clinicians across Wales for working tireless to provide PrEP and participate in data collection and completing surveys

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