



DELIVERY OF ORAL HIV PRE-EXPOSURE PROPHYLAXIS FOR PEOPLE WHO INJECT DRUGS AND ARE AT RISK OF SEXUAL EXPOSURE TO HIV DURING AN OUTBREAK

C Grimshaw¹, CS Estcourt^{1 2}, L Boyd¹, C Scade¹, E Proud¹, R Metcalfe^{1 2}

¹NHS Greater Glasgow and Clyde, UK

²Glasgow Caledonian University, UK

Ceilidh.grimshaw1@nhs.net



PREP IN SCOTLAND

- NHS-delivered
- Delivered via **Sexual Health services**
- Eligibility based on 4 defined **sexual-risk** based criteria
- Passive follow up (Glasgow)



SEXUAL TRANSMISSION OF HIV IN GLASGOW PWID OUTBREAK

- Outbreak despite needle exchange and ORT
- Sexual transmission appeared to be contributing to outbreak
- We identified those at highest risk of sexual transmission
 - Sexual contact with other PWID in the city centre
 - Transactional sex
 - Sexual contact with PLWH, without undetectable viral load for > 6 months



KEY ASPECTS OF ALTERNATIVE PREP MODEL

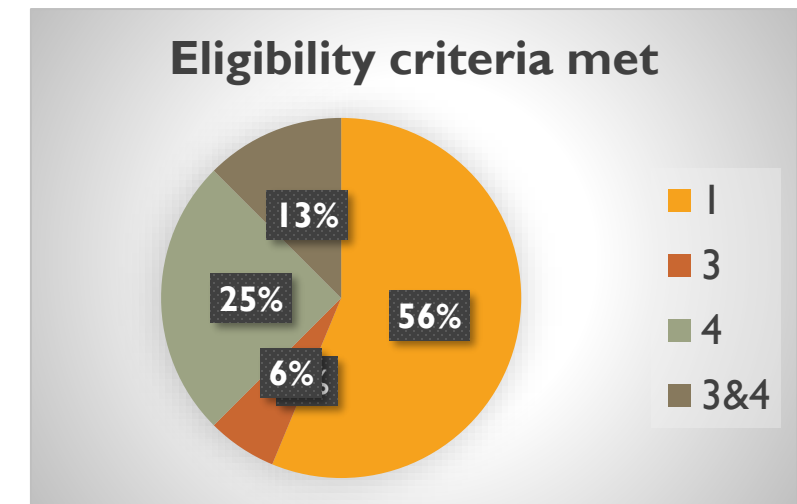
Remove potential barriers and facilitate adherence

- 1. **Active case finding** by outreach sexual health nurses
- 2. **Flexible** location for assessment and monitoring with remote physician review
- 3. **Supervised dispensing** at community pharmacies alongside ORT, with **feedback of adherence breaks** to PrEP team
- 4. **Active follow up** by outreach nurses (liaison with other services)



COHORT IDENTIFIED FOR PREP CONSIDERATION

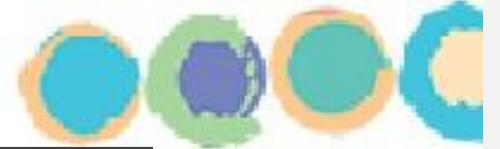
- 38 individuals identified
 - 34/38 at homeless health/addiction services or outreach
 - 3/38 at HIV services
 - 1/38 at sexual health services.
- 22 female, 5 MSM
- Median age 39 years (range 25-48 years)
- 31/38 injected drugs in the last 3 months
- 21 had active Hepatitis C, 1 Hepatitis B infection





ACCEPTABILITY

- PrEP was recommended for 31/38 (81.6%)
 - **26/31 (84%) accepted the recommendation**
 - 23/31 (74%) commenced PrEP.
 - Three untraceable after initial contact.
- Median of 28 days to commencing PrEP (IQR 85)



ADHERENCE

- **PrEP was taken on 97.1% (2460/2533) of days prescribed**
- **52.2% (12/23) individuals adherent on 100% of days.**
- Stop/restarts were common
 - Rehabilitation, incarceration, or disengagement
- All individuals who commenced PrEP had baseline HIV test
- 91.3% (21/23) had regular HIV serology monitoring
- No individuals have had positive HIV test



CONCLUSION

- Delivering PrEP to PWID in the context of an HIV outbreak is **feasible and acceptable**; achieving **high levels of drug adherence**