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Who would use PrEP? Predictors of use among MSM in London

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Background

- MSM population most at risk from HIV in UK
 - In 2011, there were an estimated 6150 new diagnoses of HIV of which half (3000) were among gay men
 - Transmission on-going (RITA).
- A recent RCT has shown pre-exposure prophylaxis (PrEP) can reduce HIV incidence among MSM.
- Although evidence from a RCT need to demonstrate value as a public health tool

Aims and objectives

- Assess the willingness of PrEP use among HIV-negative MSM in order to evaluate the feasibility and acceptability of PrEP as a public health tool by:
 - Examining current level of ARV use for prevention of HIV
 - Assessing current willingness among HIV negative MSM to use PrEP on a daily basis
 - Determining predictors of willingness to use PrEP
 - Exploring the characteristics of MSM attending sexual health clinics

Methods

- Gay Men's Sexual Health Survey 2011, community based annual/biennial survey
- From March-June 2011, fieldworkers recruited 1216 (response rate 62%) men in 31 London gay social venues.
- Participants self-completed an anonymous questionnaire on sexual behaviour and health service use
- Orasure saliva sample
- Eighty-two percent of men (n=1005) who completed a questionnaire provided a saliva sample.

Phrasing of PEP and PrEP questions

- *“Have you ever taken antiretroviral drugs after you had unprotected anal sex to reduce the risk of HIV infection? (also known as post-exposure prophylaxis or PEP)”*
- *“Have you ever taken antiretroviral drugs before you had unprotected anal to sex to reduce the risk of HIV infection? (also known as pre-exposure prophylaxis or PrEP)”*
- *“If PreP were available, how likely is it that you would take a pill (oral dose) on a daily basis to prevent HIV infection?”*

Respondent characteristics

- **Total 842 HIV sero-negative MSM**
- Mean age: 34.1 years, SD 9.2yrs, range 18.5-71.5

Characteristic	% (n/n)
Non-white ethnic background	18% (151/839)
Employed	86% (720/835)
Had > 2 years education post 16yrs	93% (777/833)
Inner London postcode	78% (660/842)

Experience of PEP and PrEP & likelihood of future PrEP use in HIV - MSM

	%	n/N
Ever used PEP	10.2%	83/814
Ever used PrEP	2.2%	17/809
<i>Likely to use PrEP if it were to become available</i>	50%	386/768
Very likely	34%	261/768
Likely	16%	125/768
Unlikely	15%	115/768
Very unlikely	26%	201/768
Don't know	9%	66/768

Predictors of the likelihood of PrEP use in HIV- MSM

Characteristic	OR (95%C.I)	AOR (95%C.I)
Age<35 years	1.55 (1.16-2.06)	1.58 (1.16-2.15)
Non-white ethnicity	1.27 (0.88-1.85)	--
≥10 AI male partners in the last yr	1.36 (1.00-1.85)	1.30 (0.94-1.80)
UAI in the last yr	1.48 (1.10-1.98)	1.13 (0.79-1.60)
UAI with casual partners in the last yr	1.58 (1.06-2.35)	1.48 (0.97-2.25)
UAI with partners of unknown/discordant HIV status in the last yr	1.39 (0.89-2.16)	--
Attended STI clinic in the last yr	1.71(1.28-2.29)	1.59 (1.03 -2.46)
Ever used PEP	2.34 (1.42-3.84)	1.96 (1.17 -3.26)

Predictors of attendance at sexual health clinics among HIV- MSM

54.8% MSM (457/834) reported attending a sexual health clinic in the last year

Characteristic	OR (95%C.I)	AOR (95%C.I)
Age<35 years	2.05 (1.55-2.71)	2.29 (1.68-3.13)
≥10 male partners in the last yr	2.41 (1.76-3.30)	2.47 (1.76-3.48)
UAI in the last yr	1.83 (1.37-2.43)	1.39 (0.98-1.98)
UAI with casual partners in the last yr	1.63 (1.09-2.43)	1.36 (0.88-2.10)
UAI with partners of unknown or discordant HIV status in the last yr	1.47 (0.94-2.32)	--

Strengths & Limitations

Strengths

- Sample of sexually active HIV- gay men
- Community-based
- Provides insight on sexual health service use of MSM likely to use PrEP

Limitations

- Convenience sample
- no details given about PrEP e.g. possible side effects, partial protection, long-term efficacy etc

Key messages

If PrEP were to become available, **1 in 2 MSM** in a community sample in London report that they would be likely to take PreP on a daily basis

Predictors for future use of PrEP included:

- <35 years
- had attended a sexual health clinic and
- experienced PEP

More than half of MSM reported attending a sexual health clinic in the last year; MSM attending clinics were more likely to

- be aged <35years
- report ≥ 10 partners the previous year

These data suggest sexual health clinics to be a suitable setting for PrEP delivery

Acknowledgments

We particularly thank

Gary Murphy and Bharati Patel

Jonathan Elford

all participants, recruiters and staff for their
valuable contributions.

Thank you!

Any questions?

