

Los Angeles County Pre-Exposure Prophylaxis (PrEP) Guidelines

Identifying Persons in Whom to Consider for PrEP

- Public Health recommends that medical providers routinely ask all adolescent and adult patients if they have sex with men, women or both men and women.
- Providers should ensure that all of their male and transgender patients who have sex with men know about PrEP.

Guidelines for Initiating PrEP in HIV-uninfected Persons

Medical providers should **recommend that patients initiate PrEP** if they meet the following criteria:

1. MSM or transgender persons who have sex with men if the patient has any of the following risks:
 - Diagnosis of rectal gonorrhea or early syphilis in the prior 12 months.
 - Methamphetamine or popper use in the prior 12 months.
 - History of providing sex for money or drugs in the prior 12 months.
2. Persons in ongoing sexual relationships with an HIV-infected person who is not on anti-retroviral therapy (ART) OR is on ART but is not virologically suppressed OR who is within 6 months of initiating ART.

Medical providers should discuss initiating PrEP with patients who have any of the following risks:

1. MSM and transgender persons who have sex with men if the patient has either of the following risks:
 - Condom-less anal sex outside of a long-term, mutually monogamous relationship with a man who is HIV negative. Unprotected receptive anal sex is associated with a higher risk of HIV acquisition than unprotected insertive anal sex, and some authorities recommend PrEP to all men who have unprotected receptive anal intercourse outside of a mutually monogamous relationship with an HIV-uninfected partner.
 - Diagnosis of urethral gonorrhea or rectal chlamydial infection in the prior 12 months.

2. Persons in HIV-serodiscordant relationships in which the female partner is trying to get pregnant.
3. Persons in ongoing sexual relationships with HIV-infected persons who are on ART and are virologically suppressed.
4. Women who exchange sex for money or drugs.
5. Persons who inject drugs that are not prescribed by a medical provider.
6. Persons seeking a prescription for PrEP.
7. Persons completing a course of anti-retrovirals for non-occupational exposure (PEP) to HIV infection.

As with all medical therapies, patients and their medical providers ultimately need to decide what treatments and preventive measures are best for them. Providers should evaluate patients' knowledge and readiness to initiate PrEP prior to prescribing Tenofovir and Emtricitabine, and should counsel and educate patients to facilitate their success taking PrEP. Medical providers should refer to national guidelines (see below) for information on how to prescribe PrEP and monitor persons on PrEP.¹

- CDC's PrEP Clinical Guidelines are available at: <http://www.cdc.gov/hiv/pdf/prepguidelines2014.pdf>
- Manufacturer copayment assistance and medication assistance programs are available. More information is available at: <http://www.truvada.com/truvada-patient-assistance>
- The PAN Foundation also provides financial assistance. More information is available at: <http://www.panfoundation.org/hiv-treatment-and-prevention>
- A list of LA County providers who prescribe PrEP are available at: <http://getprepla.com>

References:

1. U.S. Public Health Service. Pre-exposure Prophylaxis for the Prevention of HIV Infection in the United States - 2014: A Clinical Practice Guideline. 2014.
2. Division of HIV and STD Programs, Los Angeles County Department of Public Health. 2014 Annual HIV/STD Surveillance Report. [in press].
3. Buchbinder SP, Glidden DV, Liu AY, et al. HIV pre-exposure prophylaxis in men who have sex with men and transgender women: a secondary analysis of a phase 3 randomized controlled efficacy trial. *The Lancet. Infectious diseases*. 2014; 14(6):468-475.