

38. PRE-EXPOSURE PROPHYLAXIS SAME-DAY INITIATION

POLICIES AND PROCEDURES

Purpose: Philadelphia FIGHT was founded on the principles of providing accessible, high-quality HIV care and HIV prevention during the early HIV healthcare crisis and is committed to ending the HIV epidemic. Truvada for HIV Pre-exposure Prophylaxis (PrEP) has been proven highly effective and safe for HIV prevention when initiated prior to exposure to HIV.

Policy: For patients at high risk of acquiring HIV with a history of inconsistent condom use, PrEP is a highly effective biomedical prevention option that if taken consistently will prevent an HIV infection. Patients who are at highest risk of new HIV infection need to be able to initiate PrEP immediately.

I. General

Philadelphia FIGHT Community Health Centers have patients who are often at highest risk of acquiring HIV. Some of the psychosocial risk factors for acquiring HIV are the same risk factors that might make a patient vulnerable to becoming lost to care or may make a patient disconnected from their healthcare. PrEP access is integral to harm reduction and patient empowerment; patients can engage in preventative healthcare and often initiating PrEP will empower people remain engaged in care.¹

A typical PrEP initiation takes 1-2 weeks from the screening visit to the medication initiation visit. The potential loss-to-care and risk of acquiring HIV for our most vulnerable patients could be high during those 1-2 weeks and PrEP could, if initiated immediately PrEP will provide a highly effective protective factor.

II. Eligibility

Patients who have a documented negative HIV Rapid test in the office, and who meet at least one of the following criteria are eligible for same-day PrEP initiation:

1. are at high risk of exposure to HIV during the period from the PrEP screening visit (lab work, etc.) and initiation visit
2. have a documented positive STI (RPR or rectal gonorrhea) at current or last visit
3. are partnered with HIV positive individuals with detectable or unknown HIV viral loads, or history of inconsistent engagement in care or adherence to ARV medications

¹ McCormack, Sheena. PROUD Study. CROI 2015, Seattle USA.

IV. Procedure

- A. Patients will be seen for a medical visit by a clinician who will determine clinical eligibility for PrEP and assess with the patient the option of same-day PrEP initiation.
- B. If patient is nPEP eligible based on clinical guidelines (including exposure within the last 72 hours), patient should initiate nPEP and transition to PrEP in 1 month.
- C. If a patient meets both of the below criteria for possible acute seroconversion, they will not be candidates for same-day start. A clinician will draw a 4th generation HIV Ab/Ag test and bring the patient back for follow-up within one week.
 - 1. Recent (within 2 to 6 weeks) high risk of exposure to HIV-1.^a
 - 2. Signs, symptoms, or recent laboratory findings may include but are not limited to one or more of the following: fever, lymphadenopathy, skin rash, myalgia/arthralgia, headache, diarrhea, oral ulcers, leukopenia, thrombocytopenia, transaminase elevation.
- D. If patient is clinically eligible for and interested in same-day start PrEP, a clinician will order the required PrEP initiation labs per the Philadelphia FIGHT Community Health Center's HIV Pre-Exposure Prophylaxis Policy. If the clinician feels that a patient may have been exposed to HIV within the "window period" of the 4th generation HIV test (last 4 weeks) but not within the last 3 days (or they would be a nPEP candidate), then a 4th generation HIV test (Ab/Ag) will be repeated in 14 days from start of PrEP (Day 0).
- E. Patients with medical insurance will be loaded with two doses of Truvada for PrEP in the office from their prescription and will then be given a pill pack with 7days of Prep. If uninsured or effectively uninsured, the patient will meet with Philadelphia FIGHT Community Health Center staff for medication access support and will receive temporary medications (2-pill load and 7-day supply) through 340B funds. Uninsured patients will need to meet with the Benefits Coordinator prior to leaving the office to both complete Gilead MAP application and apply for medical insurance, if eligible.
- F. Patients will be counseled on safer sex practices and on the importance of medication adherence. They will complete an adherence plan that will be included in the patient's EMR and will be reassessed every 3 months.
- G. Patients will pick up their medication weekly, biweekly or monthly at the Y-HEP Health Center and follow Philadelphia FIGHT's PrEP standard of care after it is determined that the person is HIV negative and outside the window for acute seroconversion after PrEP initiation.

Philadelphia FIGHT Medical Director Approved: 09.16.2015