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The HIV Prevention Pill: The State of **PrEP Science and Implementation**

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1. The Basics

- 2. A review of the science
- 3. An update on implementation

4. Questions



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The Basics



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HIV pre-exposure prophylaxis (PrEP)

- Ongoing use of antiretrovirals by HIV-negative individuals, starting before an exposure and continuing after
- A potential HIV prevention option during periods where a person is at "high-risk" of HIV infection
- PrEP involves:
 - The daily use of a pill containing tenofovir and emtricitibine (Truvada)
 - **Regular visits with a service provider** to test for HIV and STIs, monitor side-effects and toxicity, and provide riskreduction and adherence support

The Science



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| Study name | Year | Population | Type of PrEP | Overall reduction in HIV risk |
|------------|------|------------|--------------|-------------------------------------|
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| Study name | Year | Population | Type of PrEP | Overall reduction in HIV risk |
|------------|------|---|--------------|-------------------------------------|
| iPrEX | 2011 | Gay men and other MSM and transgender women | Truvada | 44% |
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| Year | Population | Type of PrEP | Overall reduction in HIV risk |
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| 2011 | Gay men and other MSM and transgender women Truvada | | 44% |
| 2011 | Heterosexual serodiscordant couples | Truvada Tenofovir | 75% 67% |
| 2011 | 1 Heterosexual men and Truvada | | 62% |
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| | 2011 2011 | 2011Gay men and other MSM and transgender women2011Heterosexual serodiscordant couples2011Heterosexual men and | 2011Gay men and other MSM and transgender womenTruvada2011Heterosexual serodiscordant couplesTruvada Tenofovir2011Heterosexual men and TruvadaTruvada |

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| iPrEX | 2011 | Gay men and other MSM and transgender women | Truvada | 44% |
| Partners PrEP | 2011 | Heterosexual serodiscordant couples | Truvada Tenofovir | 75% 67% |
| TDF2 | 2011 | Heterosexual men and women | Truvada | 62% |
| FEM-PrEP | 2011 | Heterosexual women | Truvada | 0% |
| VOICE | 2013 | Heterosexual women | Truvada Tenofovir | 0% 0% |
| FEM-PrEP | 2011 | women Heterosexual women | Truvada | 0% 0% |

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| FEM-PrEP | 2011 | Heterosexual women | Truvada | 0% |
| VOICE | 2013 | Heterosexual women Truvada Tenofovir | | 0% 0% |
| Bangkok Tenofovir Study | 2013 | People who use injection drugs | Tenofovir | 49% |

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| Bangkok Tenofovir Study | Tenofovir | 49% | |
| iPrEX | Truvada | 44% | |
| FEM-PrEP | Truvada | 0% | |
| VOICE | Truvada Tenofovir | 0% 0% | |

| Study name | Type of PrEP | Overall reduction in HIV risk | Percentage with drug in their blood | |
|----------------------------|----------------------|-------------------------------------|---|--|
| Partners PrEP | Truvada Tenofovir | 75% 67% | 82% | |
| TDF2 | Truvada | 62% | 80% | |
| Bangkok Tenofovir Study | Tenofovir | 49% | 67% | |
| iPrEX | Truvada | 44% | 51% | |
| FEM-PrEP | Truvada | 0% | <30% | |
| VOICE | Truvada Tenofovir | 0% 0% | <30% | |

| Study name | Type of PrEP | Overall reduction in HIV risk | Percentage with drug in their blood | Risk-reduction among consistent users |
|----------------------------|----------------------|-------------------------------------|---|---|
| Partners PrEP | Truvada Tenofovir | 75% 67% | 82% | 90% 86% |
| TDF2 | Truvada | 62% | 80% | - |
| Bangkok Tenofovir Study | Tenofovir | 49% | 67% | 70% |
| iPrEX | Truvada | 44% | 51% | 92% |
| FEM-PrEP | Truvada | 0% | <30% | - |
| VOICE | Truvada Tenofovir | 0% 0% | <30% | - |

How safe is daily oral PrEP?

- PrEP increased risk of side effects including diarrhea, nausea, headache, fatigue and dizziness
- Some participants experienced small decreases in kidney and liver health and bone mineral density
- Drug resistance was **generally rare**
- No evidence of risk compensation



State of Implementation



Moving PrEP into practice

- Guidelines
- Regulatory approval
- "Off-label" prescriptions
- Insurance coverage
- Demonstration projects and open label extensions (OLEs)



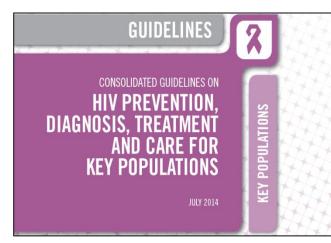
PrEP guidelines

- **CDC** Clinical practice guidelines for healthcare providers
- **WHO -** HIV prevention programming guidelines
- No national guidelines in Canada
 - Quebec has developed provincial guidelines

US Public Health Service

PREEXPOSURE PROPHYLAXIS FOR THE PREVENTION OF HIV INFECTION IN THE UNITED STATES - 2014

A CLINICAL PRACTICE GUIDELINE





Regulatory Approval

 Truvada is approved for the treatment of HIV in most countries worldwide



 The Food and Drug Administration (FDA) in the United States is the only regulatory agency to approve Truvada for the **prevention of HIV**





Santé Canada

 Truvada has not been approved for use as PrEP by Health Canada

"Off-label" prescriptions

- Prescription of an approved drug for an unapproved use
 - Common for some types of drugs
 - Legal in many countries, including Canada
- In general, a person in Canada can currently access PrEP if they can find;
 - a healthcare provider who is willing to prescribe Truvada "off-label"
 - a method of covering the cost (approx. \$800/month)
- Available, but not accessible?



Implementation questions

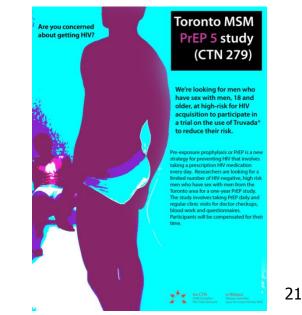
- How to identify 'optimal' PrEP candidates?
- How many people, and who, want to use PrEP?
- How is PrEP used in a 'real world' setting?
- What are the best ways to support adherence and risk-reduction?
- What impact does using PrEP have on overall health and well-being?
- What is the best setting for PrEP delivery?



Demo projects and OLEs

- Over 20 demonstration projects and OLEs currently ongoing/planned world wide
 - Over 15,000 participants
 - Range of different settings, contexts, and populations
 - Toronto-based demonstration project enrolling 50 MSM
- Evidence is beginning to emerge from these studies
 - iPrEX OLE and PROUD

| Trial/project | Sponsor/funder | Type/Calegory | Location | Population | Design/Key questions | Status |
|---|---|--------------------------|---------------|--|--|---|
| PRELUDE Study | Kirby Institute; AIDS Council of New South Wales (ACON) and Positive Life New South Wales. | Demonstration Project | Australia | Men and women at high and ongoing risk of HIV | To look into how clinics can provide PrEP. It will study whether people find it easy and agreeable to take PrEP even day, why they take it, what it's like to take and whether it changes how they have sex. It will study how easy it is for doctors to use it with their patients, and what resources are necessary to make PrEP available. | Ongoing, started September 2014. |
| VicPrEP Demonstration Project | Monash University and Alfred Health at the Victorian AIDS Council/Gay Men's Health; funded by the Victorian Government | Demonstration Project | Australia | Gay men, IDUs, HIV- negative partners in serodiscordant heterosexual couples and people who have received non- occupational post-exposure prophylaxis (N-PEP) on more than two occasions in the previous 12 months | To determine the effectiveness of PrEP in the local setting and the factors contributing to its success. Trunada will be administered 100 participants for up to 12 months: The other 100 participants will eich not to use Trunada, but agree to provide relevant information through regular on-line surveys. | Ongoing: started mi July 2014. Expected completion July 201 |
| Sisters Antiretroviral therapy Programme for Prevention of HIV -an Integrated Response (SAPPH-Ire) | Centre for Sexual Health and HIV/AIDS Research Zimbabwe; University College Londor; London School of Hygiene and Tropical Medicine ; RTI; DFID: UNPPA | Open Label | Zmbabwe | Female sex workers | Seeks to enhance HIV treatment and prevention among 28,000 highway-based sex workers by increasing uptake and frequency of testing, demonstrate acceptability and beauting of testing HPE? maximize retention in care, promote timely initiation of ART for those eligible, and maximize adherence to both ART and PHEP. | Ongoing, started Jul 2014, Expected completion October 2015. |
| Partners Demonstration Project | Led by a team of scientists from Kenya, Uganda and the US; funded by NMHINIH, USAID and BMGF | Demonstration Project | Kenya, Uganda | Serodiscordant couples | Evaluates HIV prevention preferences among approximately 1,000 HIV sendiscontant ougles, adherence Io-PET and ART and interface of reproductive health priorities and ART-based provention. Will implement PPE as Tringfor Io-ATT, providing PEPT to HIV-negative partners when HIV-positive partner is not yet on ART due to ineligibility based on country guidelines or personal decision. | Ongoing: fully enrolled. Expected completion 2016. |
| PrEPBrasil | University of Sao Paulo; Centro de Referência e Treinamento DST AIDS; Oswaldo Cruz Foundation | Demonstration Project | Brazil | MSM; transgender women | Plans to enroll 400 MSM and transgender women to assess the acceptability, feasibility and safety of daily, oral TDF/FTC as PrEP over 12 months. | Ongoing: expected completion date of January 2016. |



AVAC

Moving Forward



Integrating PrEP into our work

- Improve awareness and knowledge of PrEP
- Support PrEP-related decisions
- Facilitate access to PrEP
- Support adherence and risk-reduction
- Push for demonstration projects, guidelines and regulatory approval





PrEP uptake in the United States

- Regulatory approval and local/national guidelines
- Awareness campaigns and PrEP resources
- Widespread financial coverage
- National PrEP telephone line for clinicians (PrEPline)
- Community 'navigators' (San Francisco)
- PrEP providers list (Seattle)



The future of PrEP?

- Intermittent use of Truvada pills
- Use of oral pills containing other antiretrovirals
- Rectal and vaginal gels
- Long-lasting injectables and intravaginal rings











Thank You!

