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# HIV testing in sexual health clinics – do they need to change for PrEP?

**Dr Sheel Patel**  
**Consultant in HIV/GUM**

56 Dean Street  
Chelsea and Westminster NHS Foundation Trust

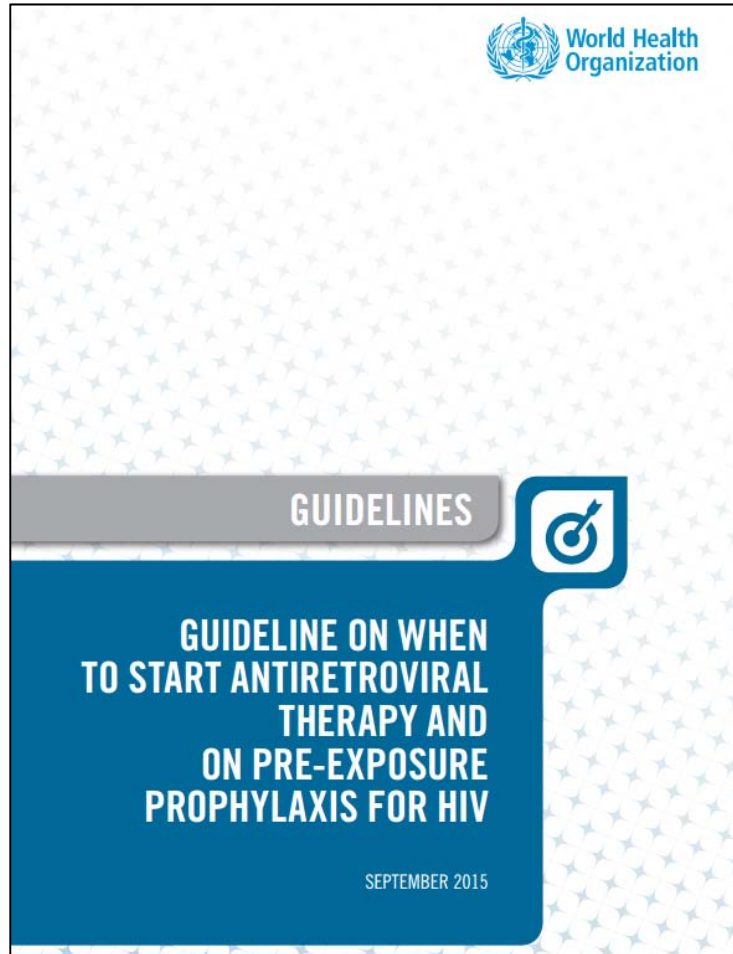


# Overview

- WHO Recommendation
- Europe PrEP experience
- UK PrEP experience
- Testing pathways in the UK
- Dean Street clinics & PRIME
- Case studies
- Conclusion

# WHO 2015 Recommendation

HepHIV 2017  
JANUARY - FEBRUARY - MALTA  
Hepatitis B and C: Challenges and Timely Testing and Care



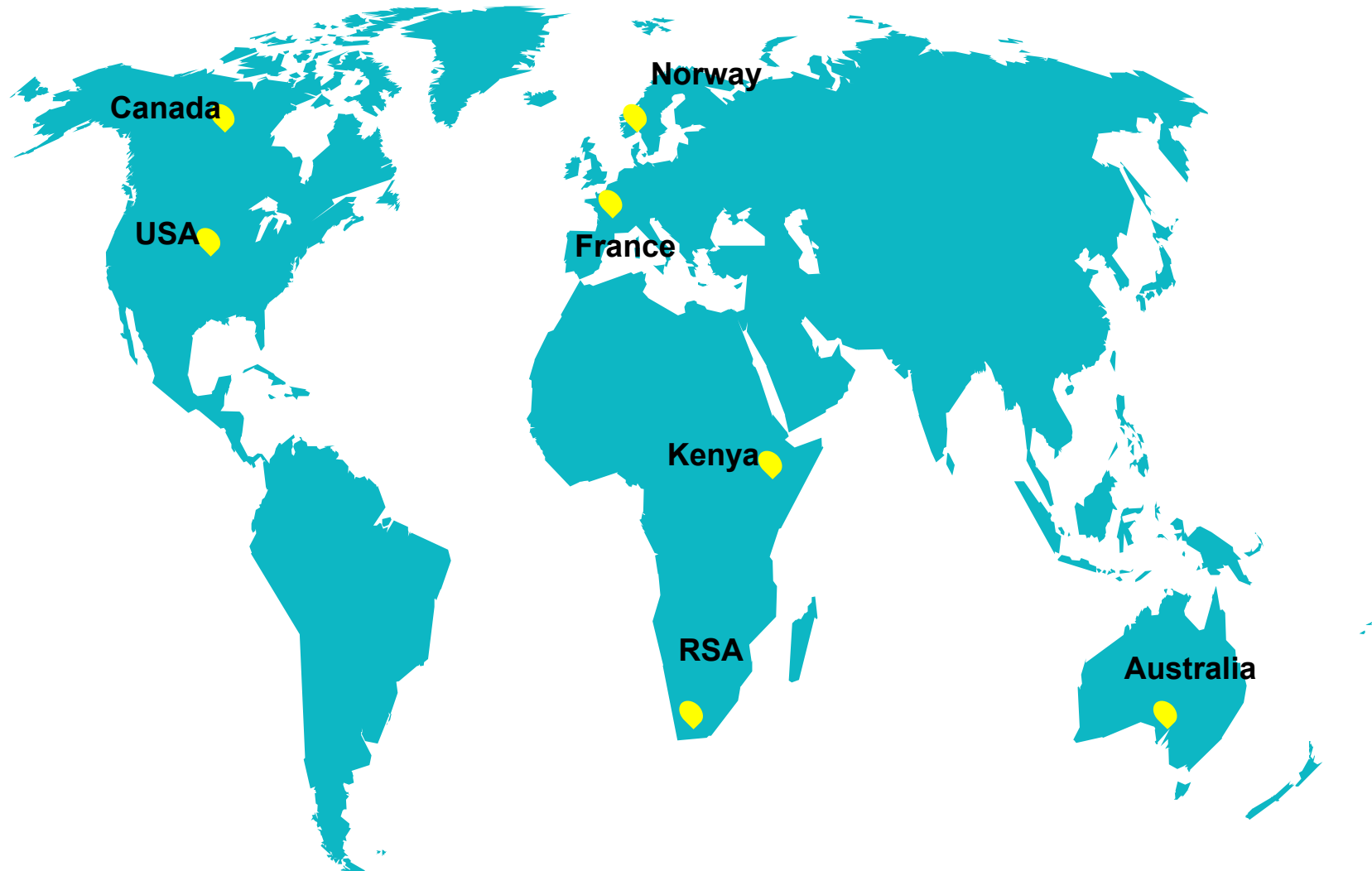
**Oral PrEP containing TDF should be offered as an additional prevention choice for people at substantial risk of HIV infection as part of combination HIV prevention approaches**

Strong recommendation, high quality evidence

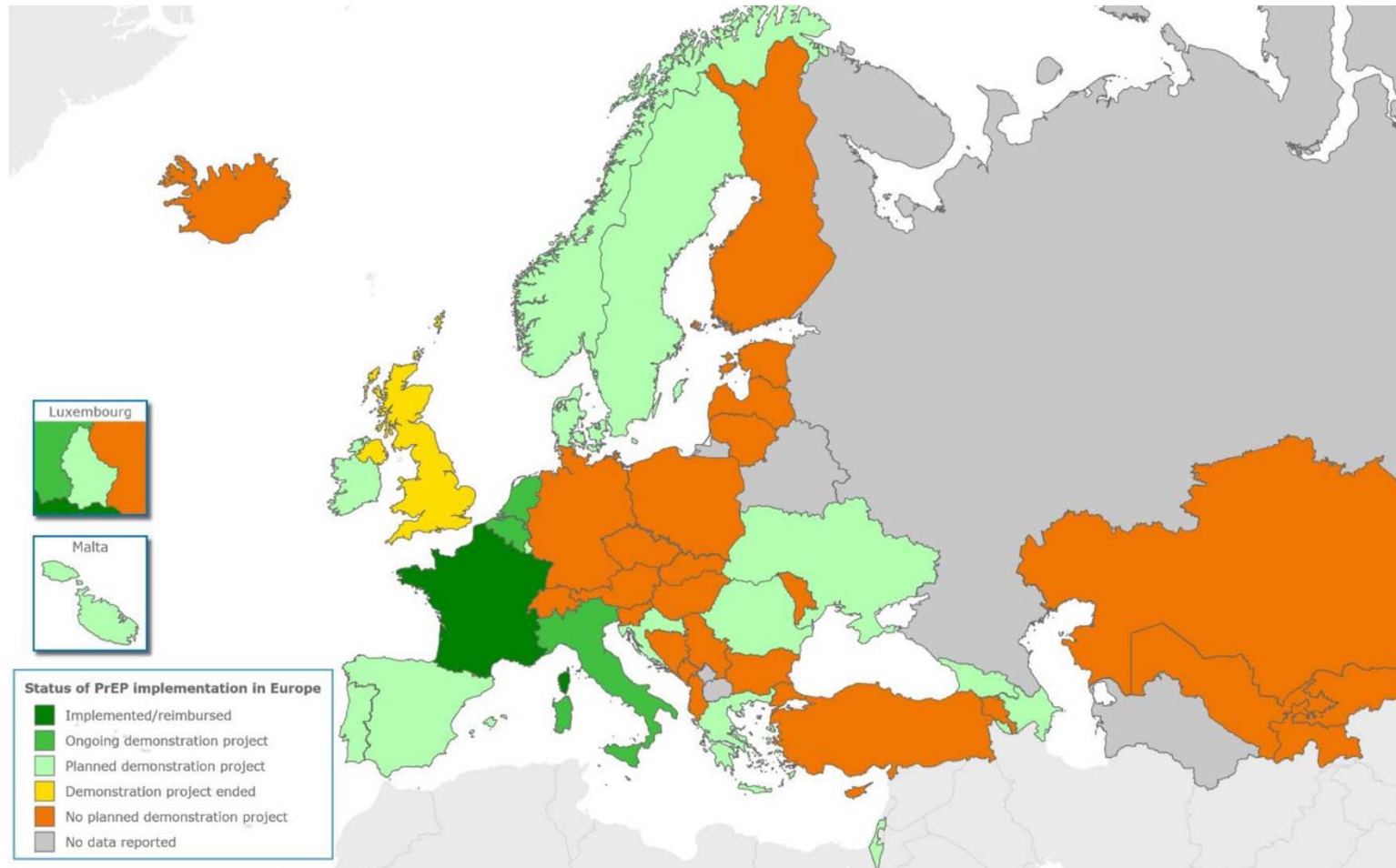
Full guidelines available here:

[http://apps.who.int/iris/bitstream/10665/186275/1/9789241509565\\_eng.pdf?ua=1](http://apps.who.int/iris/bitstream/10665/186275/1/9789241509565_eng.pdf?ua=1)

# Which countries have *approved* PrEP?



# Status of PrEP as of August 2016



PrEP for HIV Prevention in Europe, ECDC Oct 2016

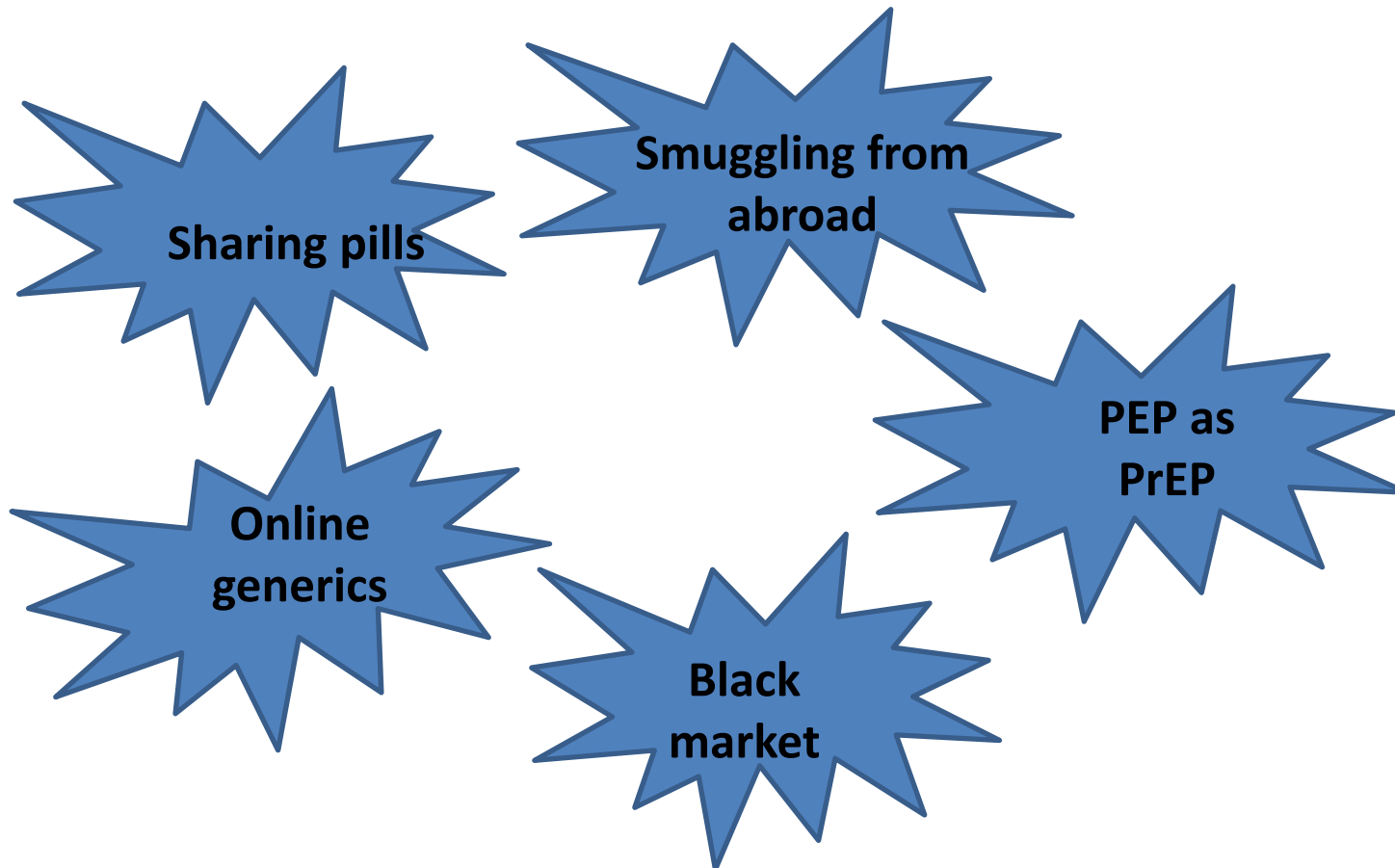
# Europe experience

- No clear consensus in Europe with regards to PrEP (France & Norway excluded)
- MSM disproportionately affected by HIV & STIs
  - New HIV diagnoses increased by 44% between 2005-2014
  - 42% new HIV diagnoses were in MSM (2014)
- Provision of sexual health screening variable
  - 30% MSM had a sexual health screen in the past year
- Access to and uptake of HIV testing appears to be low in many EU/EEA countries
  - 20-47%\* MSM had tested for HIV in the last 12 months

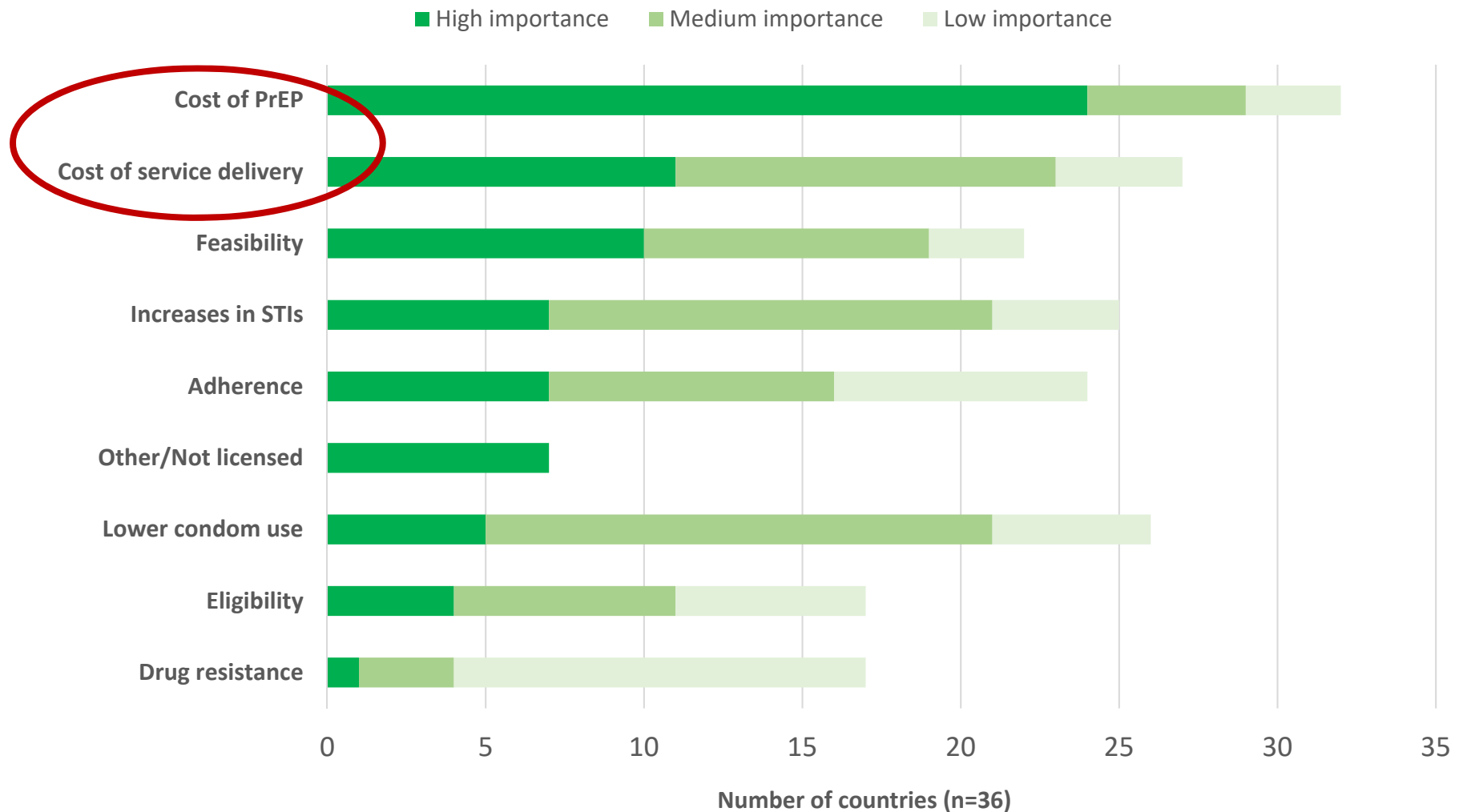
\*Hornet PrEP 2016, EMIS network 2010 & ECDC guidance on HIV/STI prevention amongst MSM 2015

# PrEP Access in Europe

- PrEP in Europe Initiative



# What issues are limiting or preventing the implementation of PrEP in Europe?





# PrEP use amongst MSM in Europe

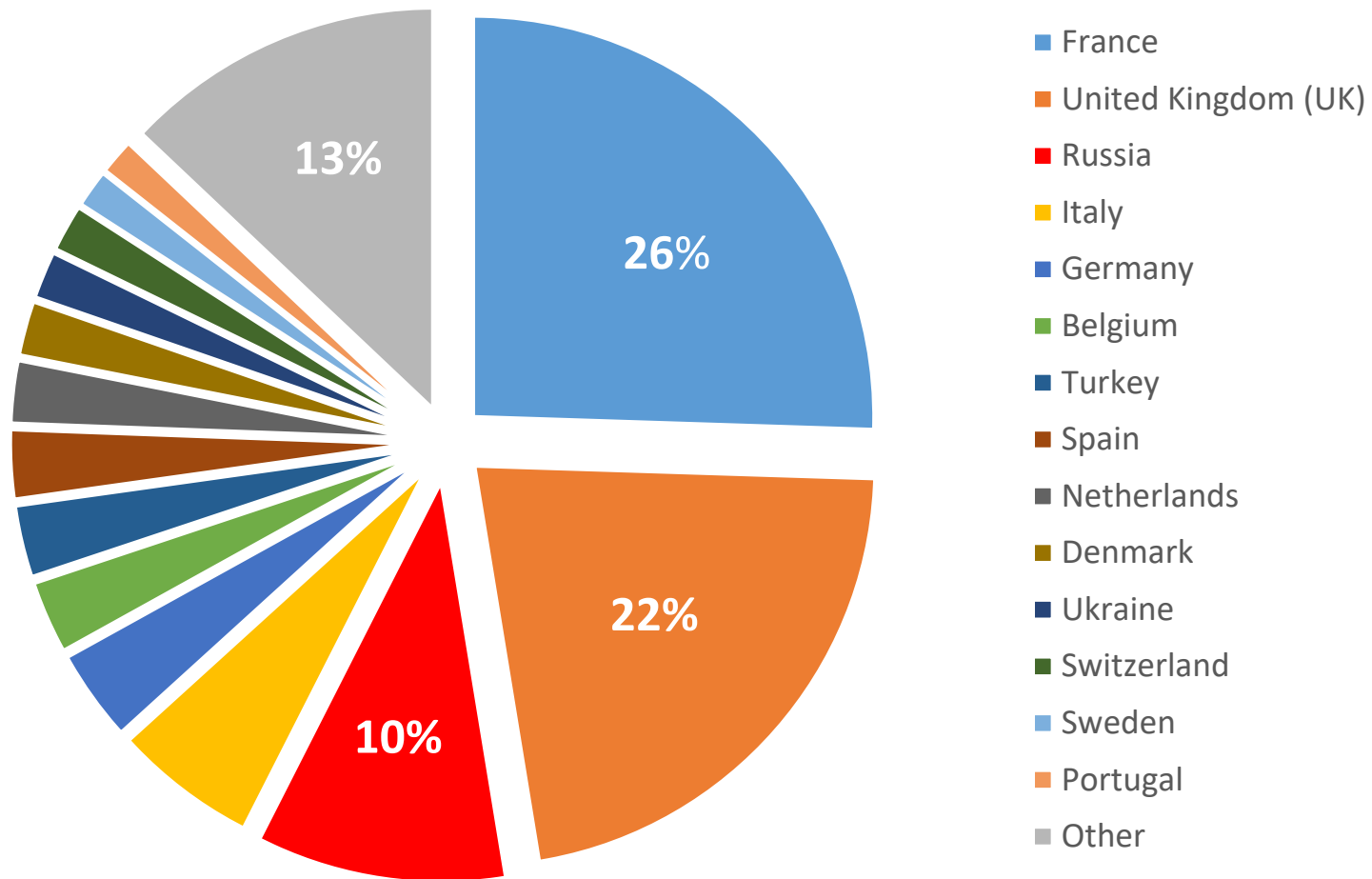
- Hornet/ECDC survey on PrEP



A screenshot of a mobile browser interface. The status bar at the top shows 'TELIA 4G', '14:28', and '89%' battery. The address bar contains 'Klar' and 'SurveyMonkey Inc.'. Below the address bar is an orange square with a white stylized bird logo. Underneath is a dark blue header with the text 'European PrEP -en' and a light blue sub-header with 'European PrEP/HIV Survey'. The main content area contains a paragraph of text: 'PrEP (Pre-Exposure Prophylaxis) is a proven effective method to prevent HIV. It is becoming a popular option to help gay men take control of their sexual health. However, in Europe the approval of this drug is still behind other parts of the world. We are helping collect data to advocate for access to this HIV prevent tool and sharing these results at the request of the European Center for Disease Control. No personal information is collected and answers remain anonymous and are not connected to your Hornet profile in any way.'

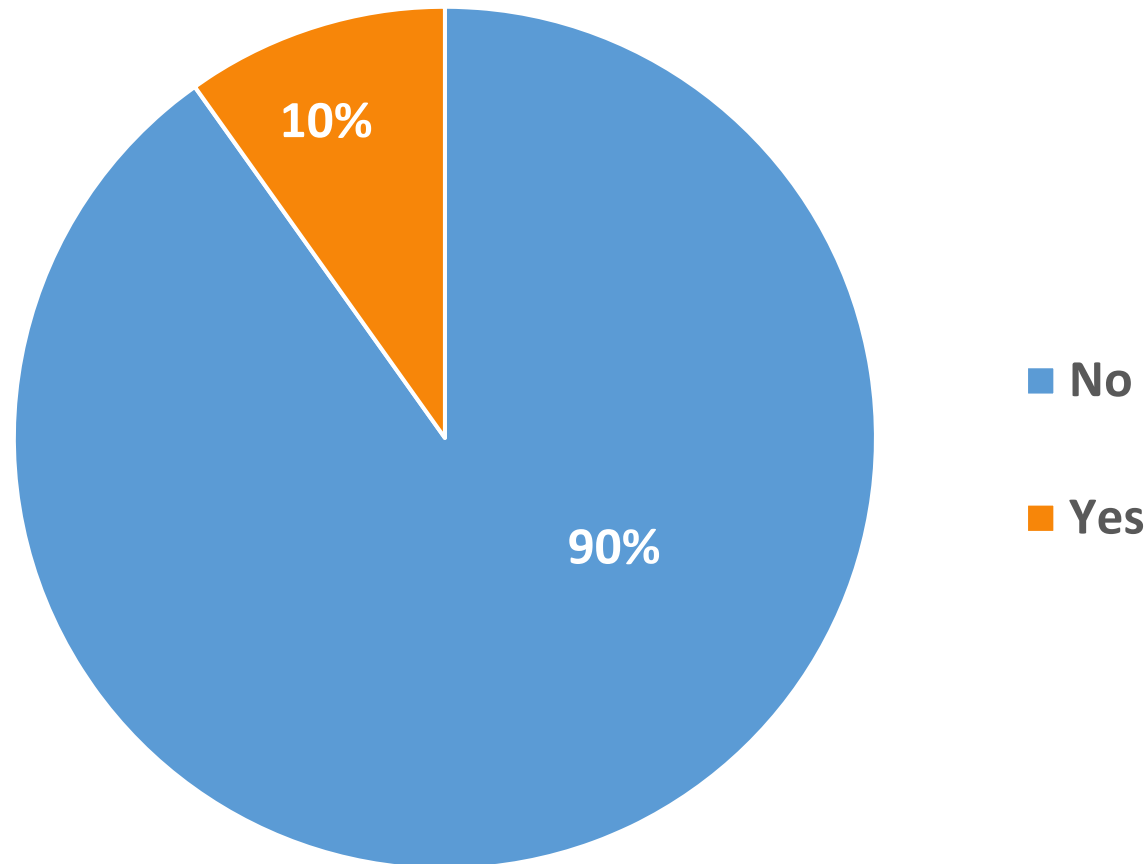
# Hornet survey respondents

8543 persons responded



# Are you currently taking PrEP?

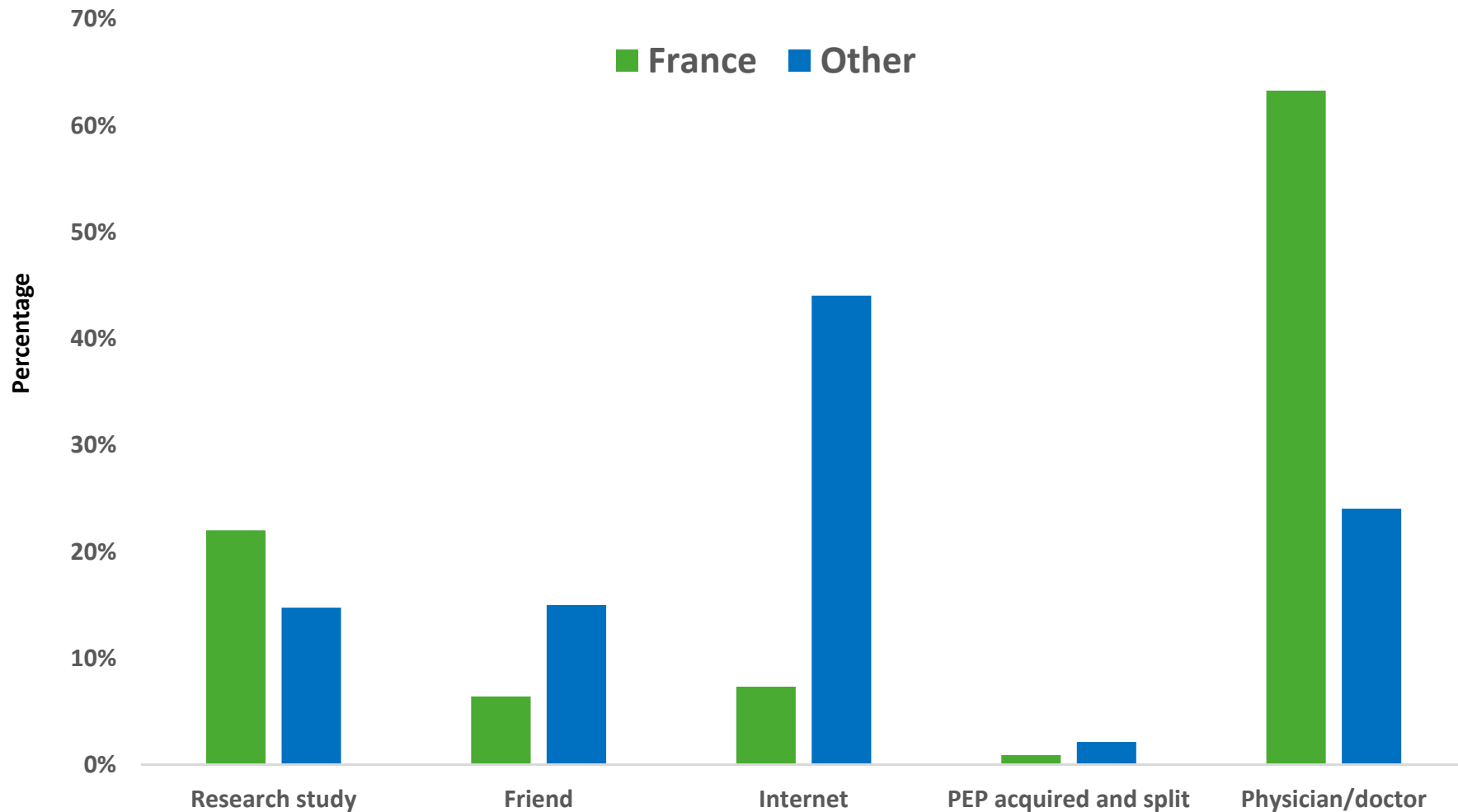
n= 8048 (excludes HIV-positive respondents)



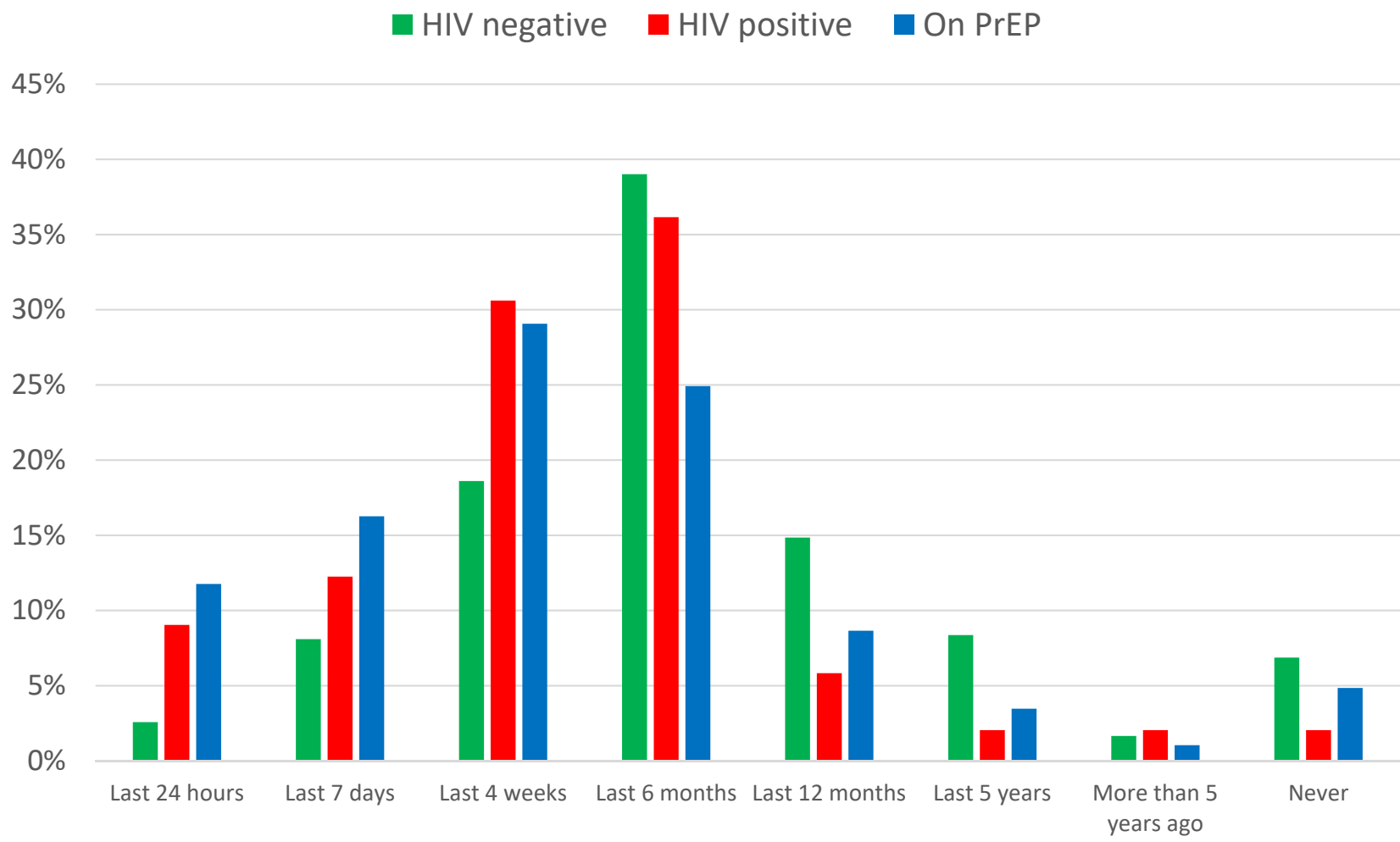
69% of those on PrEP said their sexual health provider was aware that they were taking PrEP

# Where did you obtain PrEP?

n= 528 persons on PrEP responding to this question



# When did you have your last sexual health check? (excluding French respondents)



# Danger of not attending a clinic

- **Chaotic, unmonitored access**
  - No baseline tests
  - Taking PrEP incorrectly
  - Resistance
  - Less renal monitoring– possibly none at all
- **Missed opportunity**
  - To reduce HIV
  - To control STIs
  - PrEP education



# UK PrEP Experience

- PrEP is not available on the National Health Service (NHS) in England
- Large numbers of MSM are accessing generic PrEP from internet based pharmacies
  - Legal under UK import laws
  - Without monitoring or regular HIV testing
  - Concerns about the authenticity of medicines purchased online

# UK PrEP Experience

- **Clinical monitoring and support**
- **Established a new service at 56 Dean Street**
  - Therapeutic drug monitoring (TDM) for plasma TFV and FTC
  - for HIV negative individuals who reported purchasing PrEP on the internet (from Feb-Sept 2016)
  - To ensure drug concentrations were consistent with previously published data for FDA approved preparations of TDF/FTC

\*TFV- tenofovir, FTC- emtricitabine

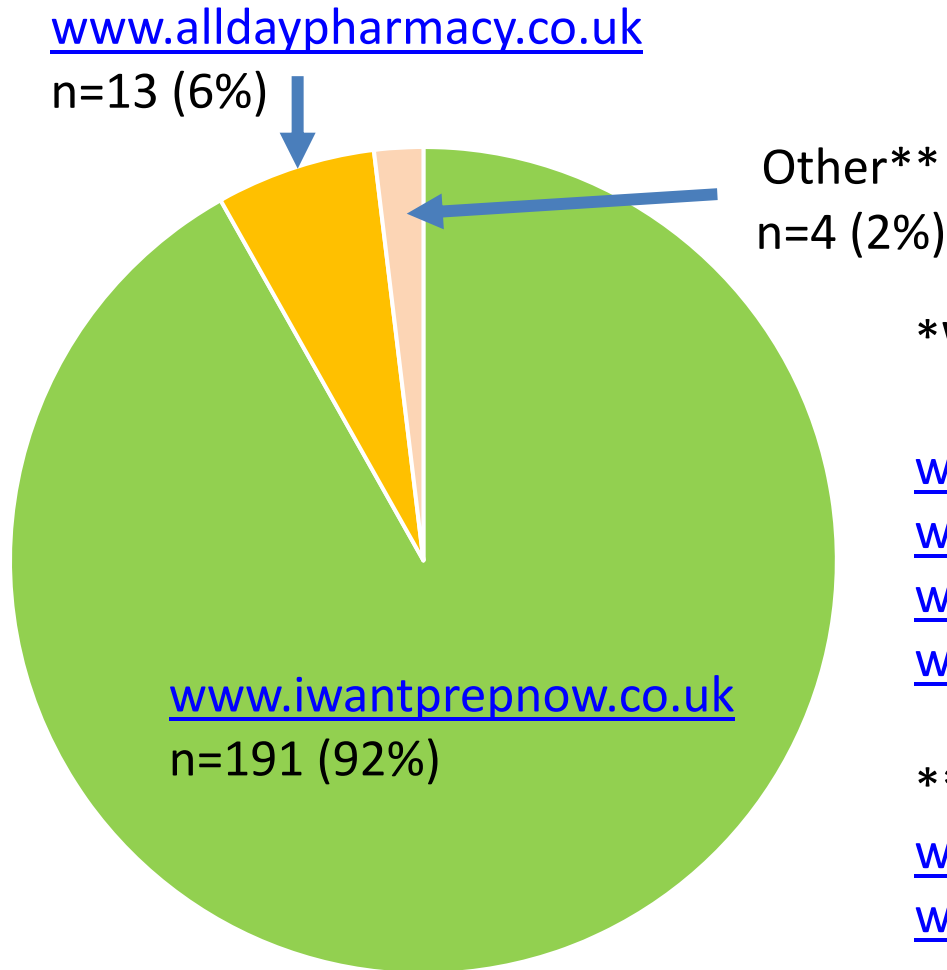




# Baseline characteristics

Characteristic	56 Dean Street (n=234)	IPERGAY (n=199)	PROUD (n=273)	San Francisco Kaiser Permanente (n=972)
<b>MSM (%)</b>	100%	100%	100%	98%
<b>Median age (years) (IQR)</b>	37 (31-45)	35 (29-43)	35 (30-43)	37 (18-68)
<b>White race (%)</b>	85%	94%	81%	65%
<b>Chemsex (%)</b>	35%	43%	43%	-
<b>PrEP dosing schedule</b>	15% event- driven/85% daily	Event driven	Daily	Daily

# Online PrEP suppliers



\*Within [www.iwantprepnw.co.uk](http://www.iwantprepnw.co.uk):

[www.unitedpharmacies-uk.md](http://www.unitedpharmacies-uk.md) n=131

[www.alldaychemist.com](http://www.alldaychemist.com) n=37

[www.lwantprepnw.co.uk](http://www.lwantprepnw.co.uk) n=20

[www.aids-drugs-online.com](http://www.aids-drugs-online.com) n=3

\*\*Other suppliers (1 person each):

[www.everydaypharmacy.co.uk](http://www.everydaypharmacy.co.uk)

[www.buylowdrugs.com](http://www.buylowdrugs.com)

[www.clearskypharmacy.biz](http://www.clearskypharmacy.biz)

[www.inhousepharmacy.vu](http://www.inhousepharmacy.vu)

# Generic TDF/FTC preparations used

Cipla TENVIR-EM  
n=181



Emcure TAVIN-EM, n=2



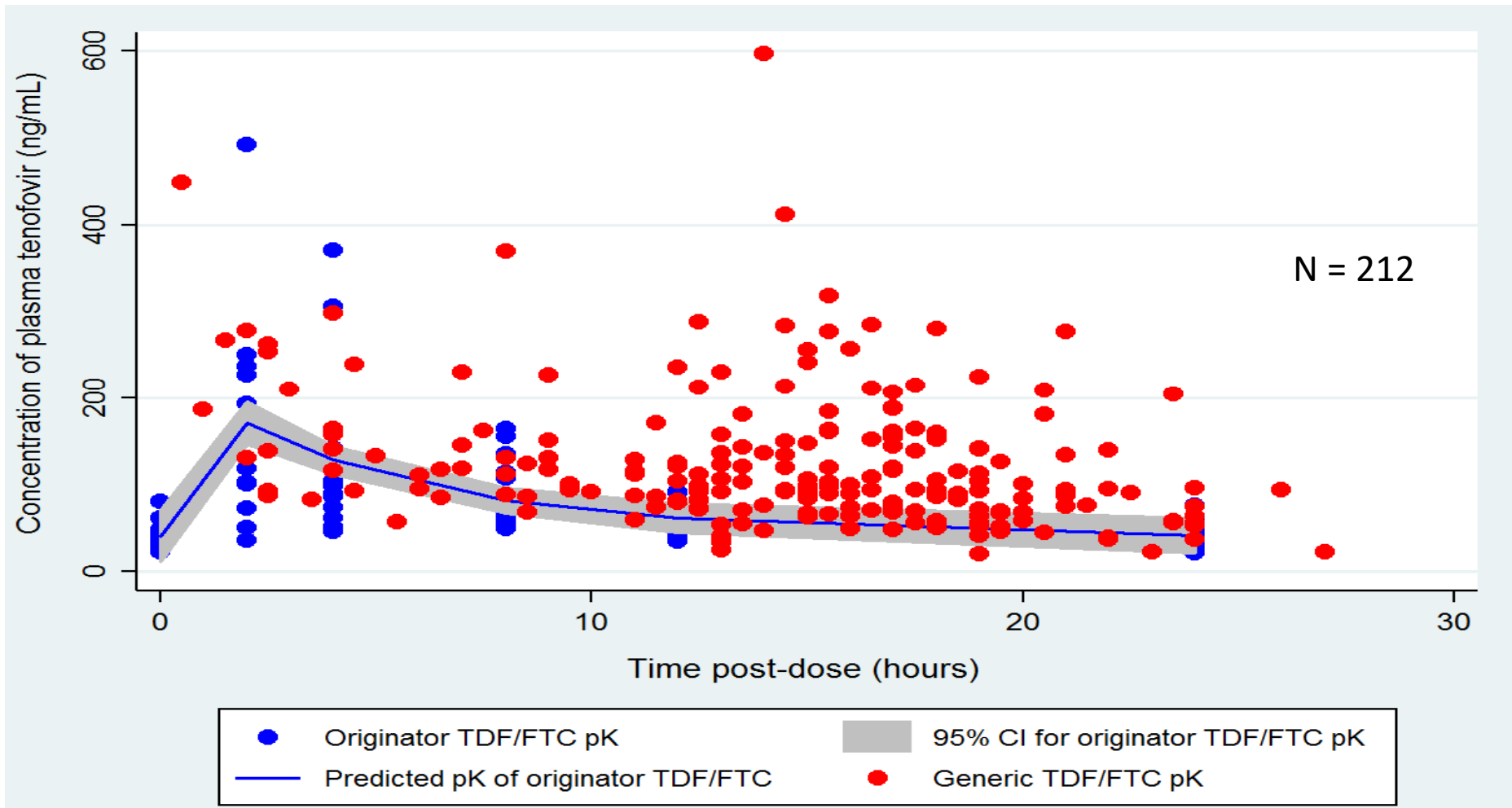
Mylan RICOVIR-EM, n=1



# Plasma TFV concentrations

Median 103 ng/mL (range 21-597)

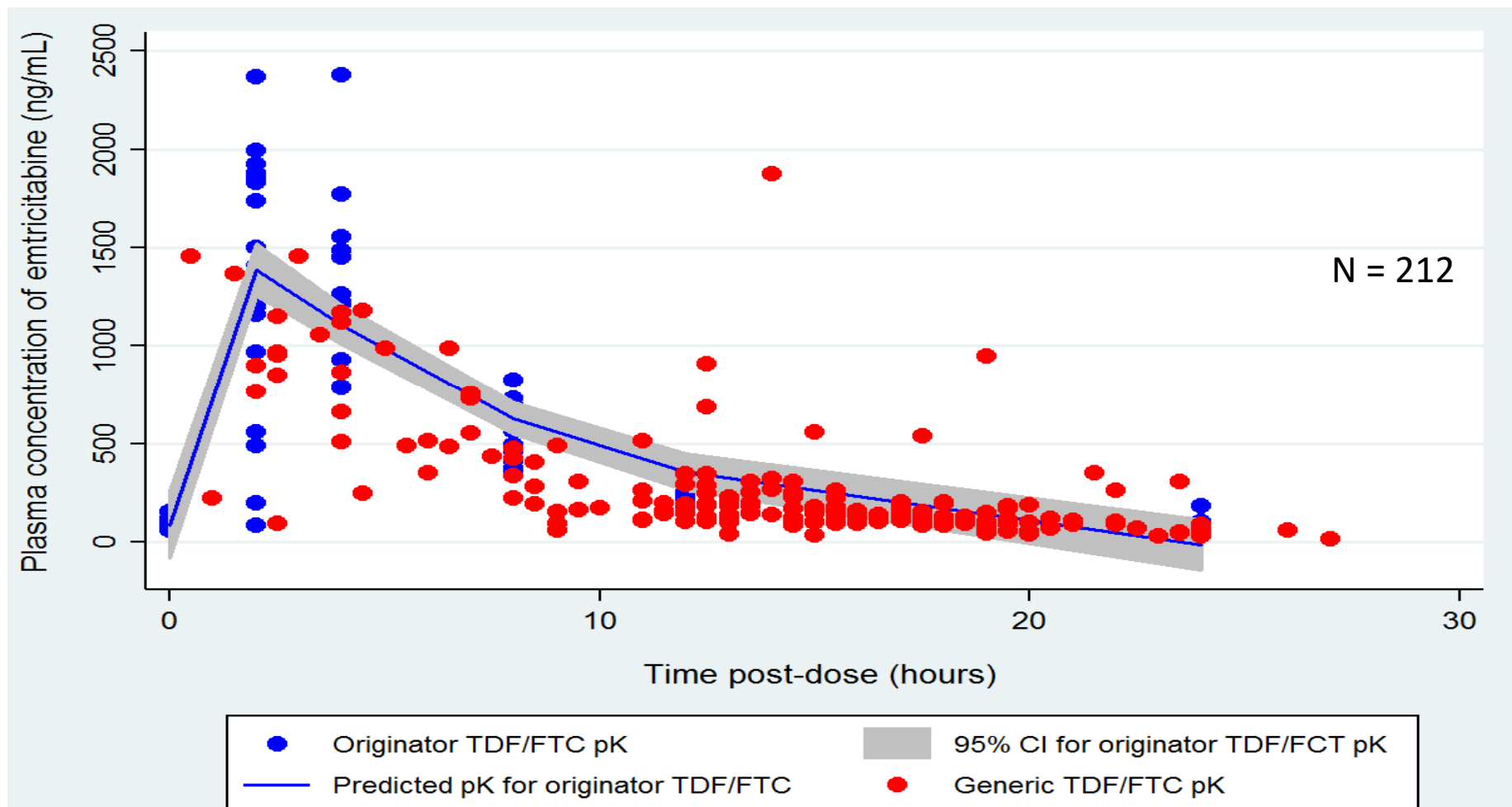
Time post-dose: median 15.5 hours (range 0.5 – 27)



# Plasma FTC concentrations

Median 142 ng/mL (range 17-1876)

Time post-dose: median 15.5 hours (range 0.5 – 27)



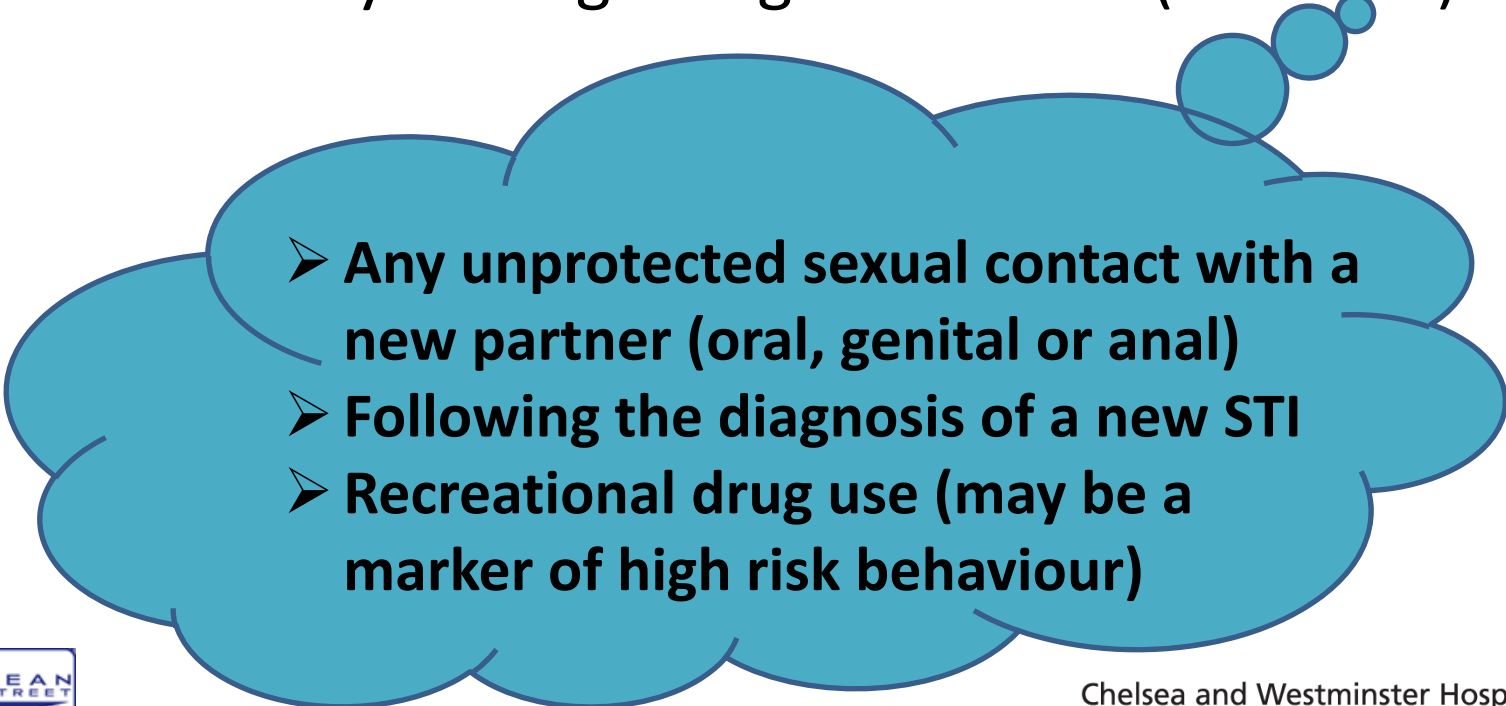
# TDM Findings

- No evidence of fake preparations of PrEP
- Branded Truvada unaffordable for most
- Generic TDF/FTC affordable for many more
- No new HIV infections or renal function decline

# HIV testing in Sexual health clinics – do they need to change for PrEP?

# UK HIV testing pathways

- UK national guidelines:
  - Annual HIV testing in MSM
  - 3-monthly testing in high risk MSM (incl PrEP)

- 
- Any unprotected sexual contact with a new partner (oral, genital or anal)
  - Following the diagnosis of a new STI
  - Recreational drug use (may be a marker of high risk behaviour)



# UK Sexual health clinics

- Free, Open access, scattered across the UK
- Sexual health screening & treatment
  - HIV
  - Bacterial and Viral STIs
  - Hepatitis B and C
- Point of care testing
- PEP
- PrEP advice and monitoring
- Vaccination: hepatitis B and HPV
- Risk reduction & Support
- Education



# Influence of PrEP on HIV testing

- Once available on NHS
  - Higher number of patients will likely present for HIV testing
  - Expect HIV test 4 x year
- Increased demand for our services



# Increased demand for sexual health services

- **Consider new ways of working**
  - Online services e.g. skype clinics
  - Home testing
  - Community outreach clinics e.g. within clubs, saunas, GP services
  - Dean Street Express model
- **Encourage MSM to re-attend**
  - 3-monthly recall strategies
- **Education**
  - Staff and patients



# 56 Dean Street & Dean Street Express

HepHIV 2017  
31 JANUARY-2 FEBRUARY · MALTA  
HIV and Viral Hepatitis: Challenges of Timely Testing and Care

- Sexual health clinics based in Soho, London
- 140,000 attendances in 2016



# 56 Dean Street

HepHIV **2017**  
31 JANUARY-2 FEBRUARY · MALTA  
HIV and Viral Hepatitis: Challenges of Timely Testing and Care





- Nurse and Doctor GU appointments  
- 2 Dr, 3 Nurse
- Health Advisor
- Emergency Contraception
- PEP
- Lab on each floor

2



- Advanced Nurse/Doctor  
- 3 Dr, 4 Nurse

- Booked appointments
- Triage appointments



- HIV clinics
  - 3 Dr, 4 Nurse
- Hepatitis clinics
- HIV Oncology clinic
- Urology clinic
- Dermatology clinics
- PrEP clinic
- Dietician
- Contraception/ LARC
- ED/Psychology/Psychosexual
- Pharmacy



# Dean Street Express

HepHIV 2017

31 JANUARY-2 FEBRUARY · MALTA

HIV and Viral Hepatitis: Challenges of Timely Testing and Care



# Dean Street diagnoses in 2015

- **HIV infection**

- 1 in 9 of the UK's and 1 in 4 of London's new HIV diagnoses
- 1 in 5 of the UK's and 1 in 2 of London's new HIV diagnoses in MSM

- **Almost a third of all bacterial STIs in the UK**

- Gonorrhoea, Chlamydia, Syphilis

(Public Health England, 2016)

# Dean Street PRIME

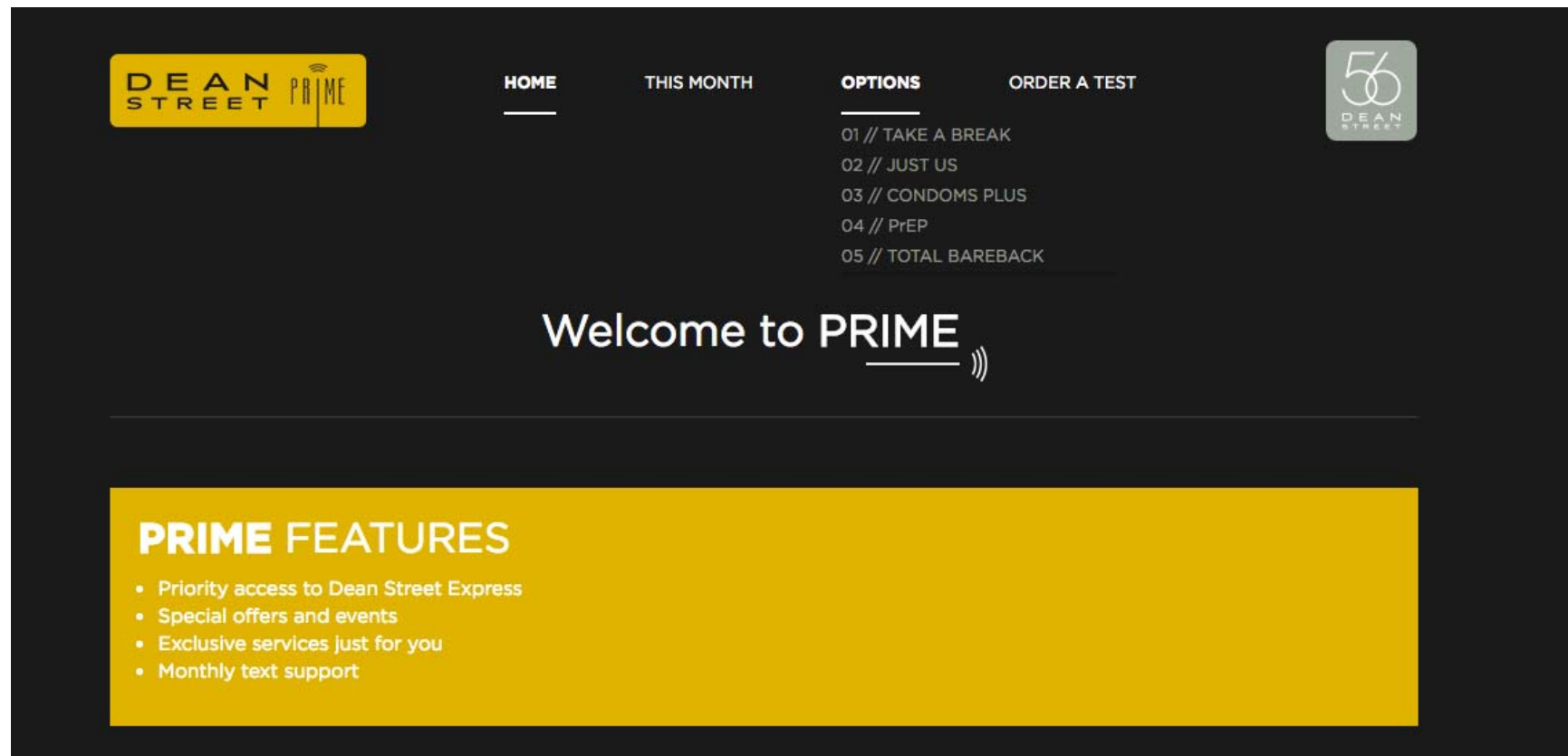
HepHIV 2017  
31 JANUARY-2 FEBRUARY · MALTA  
HIV and Viral Hepatitis: Challenges of Timely Testing and Care

- Programme tailored for MSM at highest risk of HIV acquisition:
  - Diagnosis of rectal bacterial STI
  - Diagnosis of syphilis
  - Attendance for HIV post-exposure prophylaxis
  - Condomless receptive anal intercourse with >1 partner



# Dean Street PRIME

HepHIV 2017  
31 JANUARY-2 FEBRUARY · MALTA  
HIV and Viral Hepatitis: Challenges of Timely Testing and Care



# Dean Street PRIME

HepHIV 2017  
31 JANUARY-2 FEBRUARY · MALTA  
HIV and Viral Hepatitis: Challenges of Timely Testing and Care

PRIME is an enhanced service for selected Dean Street patients.

Watch the videos, make a choice, take control!

There are some warning signs that predict a very high chance of catching HIV. We've noticed that your risk over the next year is greater than 1 in 10. We've designed PRIME to put you in control of what happens next.

We have crafted five programmes that can be flexible with you and your lifestyle. You can pick the options that best fits you now and then move programme as your life changes.

Each month we'll send you a text with details of exclusive services, events and information. This text message will also allow you to walk into Dean Street Express at any time without a reservation.

**Choose one of the five options below and take control of your sexual health.**



# Dean Street PRIME

HepHIV 2017  
31 JANUARY-2 FEBRUARY · MALTA  
HIV and Viral Hepatitis: Challenges of Timely Testing and Care

- High risk MSM can choose risk reduction and intervention strategies to suit them:
  - Condoms
  - Take a break
  - PrEP
  - Total bareback
  - Just us



# UK HIV testing pathways

- UK national guidelines:
  - Annual HIV testing in MSM
  - 3-monthly testing in high risk MSM (incl PrEP)

- Any unprotected sexual contact with a new partner (oral, genital or anal)
- Following the diagnosis of a new STI
- Recreational drug use (may be a marker of high risk behaviour)

# Case Study

- Mr X, MSM, age 25
- Works as an escort
- Recreational drugs:
  - Every weekend- GHB, Mephedrone
- Sexual Hx:
  - 10 partners every weekend, 25% Condom use
- **How often SHS?**





# HIV testing in Sexual health clinics – do they need to change for PrEP?

# Conclusion

- **In the UK**
  - **No change necessary**
  - Promote regular attendance for PrEP users
- **Future challenges:**
  - Commissioning changes
  - Expand innovative practice
  - Engagement with high risk patients
  - Continued education of staff and patients

# Conclusion

- **Demand for PrEP likely to increase**
- **We need to promote regular attendance to clinical services**
  - Promote adherence
  - HIV and STI testing
  - Renal monitoring
  - Monitor and advice - online purchases
- **Consistent information about PrEP is key**
  - Educating our staff
  - Engaging with community, peer and online forums



# Thank you

- Professor Sheena McCormack
- Dr Nneka Nwokolo
- Dr Alan McOwan
- Dr Gary Whitlock