


# DISCLOSURES

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Cardea Services is approved as a provider of continuing nursing professional development by Montana Nurses Association, an accredited approver with distinction by the American Nurses Credentialing Center's Commission on Accreditation.

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the California Medical Association (CMA) through the joint providership of Cardea and Northwest Portland Area Indian Health Board. Cardea is accredited by the CMA to provide continuing medical education for physicians.

Cardea designates this live web-based training for a maximum of 6.0 *AMA PRA Category 1 Credit(s)*<sup>TM</sup>. Physicians should claim credit commensurate with the extent of their participation in the activity.

 The Washington State Pharmacy Association is accredited by the Accreditation Council for Pharmacy Education as a Provider of continuing pharmacy education. ACPE UAN # | 0130-9999-21-067-L01-P | 6.0 ACPE CPE hrs. | Activity Type: Knowledge



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## COMPLETING THIS ACTIVITY

Upon successful completion of this activity 6.0 contact hours will be awarded including 4.5 hours of nursing pharmacology.

Successful completion of this continuing education activity includes the following:

- Sign in and attend each ECHO session – participation in all six sessions is required- no partial credit will be issued.
- Complete an online evaluation using the link provided at the last session
- Complete an online certification request after the last session

CME and CNE: After completing the above steps, certificates will be sent via email. There is no charge for your CE credit.

CPE: After completing the above steps, WSPA will upload your CE within 5-6 weeks and will notify you by email. You will need to check your CPE Monitor to confirm you CE. There is no charge for your CE credit. In order to obtain credit, pharmacists must supply their NABP number and date of birth.

Your certificate will be sent via email

If you have any questions about this CE activity, contact Michelle Daugherty at [mdaugherty@cardeaservices.org](mailto:mdaugherty@cardeaservices.org) or (206) 447-9538



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None of the planners or presenters of this CE activity have any relevant financial relationships with any commercial entities pertaining to this activity.

# Indications and Contraindications for PrEP

Whitney Essex, MSN, FNP-BC

Jorge Mera, MD, FACP

Infectious Diseases, Cherokee Nation Health Services

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# Outline

- Pre-test
- Indications for PrEP
  - Obtaining a sexual history
- Contraindications for PrEP
- Post-test

# Pre-Test: Who is a good candidate for PrEP?

A

- A 28-year-old male is seen in the clinic. He reports having receptive condomless anal intercourse with two different men on the same night 6 weeks ago.

B

- A 44-year-old woman who regularly injects heroin. Since being cured of HCV, she no longer shares injection equipment, but will use her own needles repeatedly.

C

- A 19 year old male presents to the clinic requesting PrEP but will not disclose why he is requesting it.

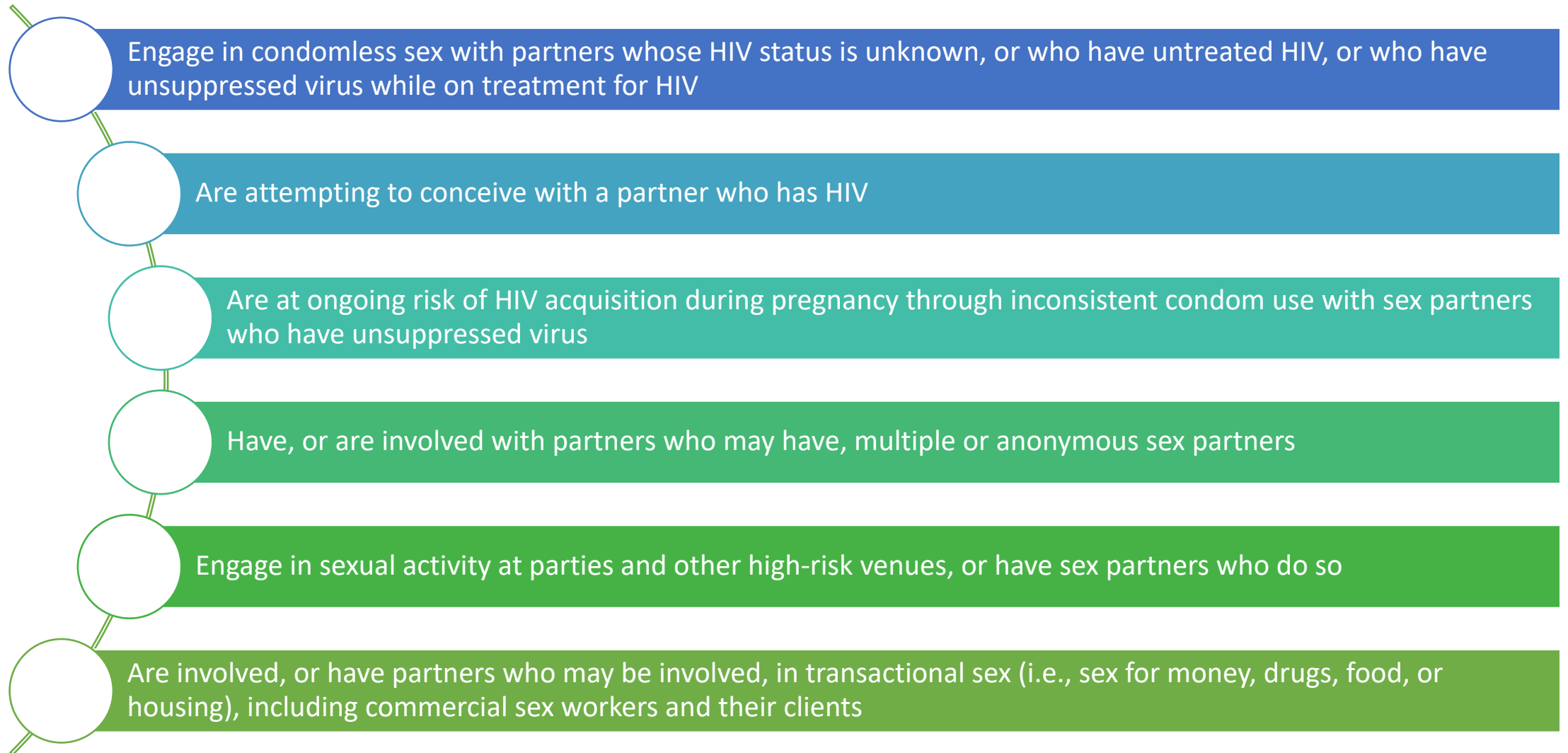
D

- A 32 year old female in a mutually monogamous relationship with an HIV positive partner who has been virally suppressed for over 2 years presents requesting PrEP.

## Who should be offered PrEP?

- Anyone at risk of HIV acquisition

# Indications for PrEP

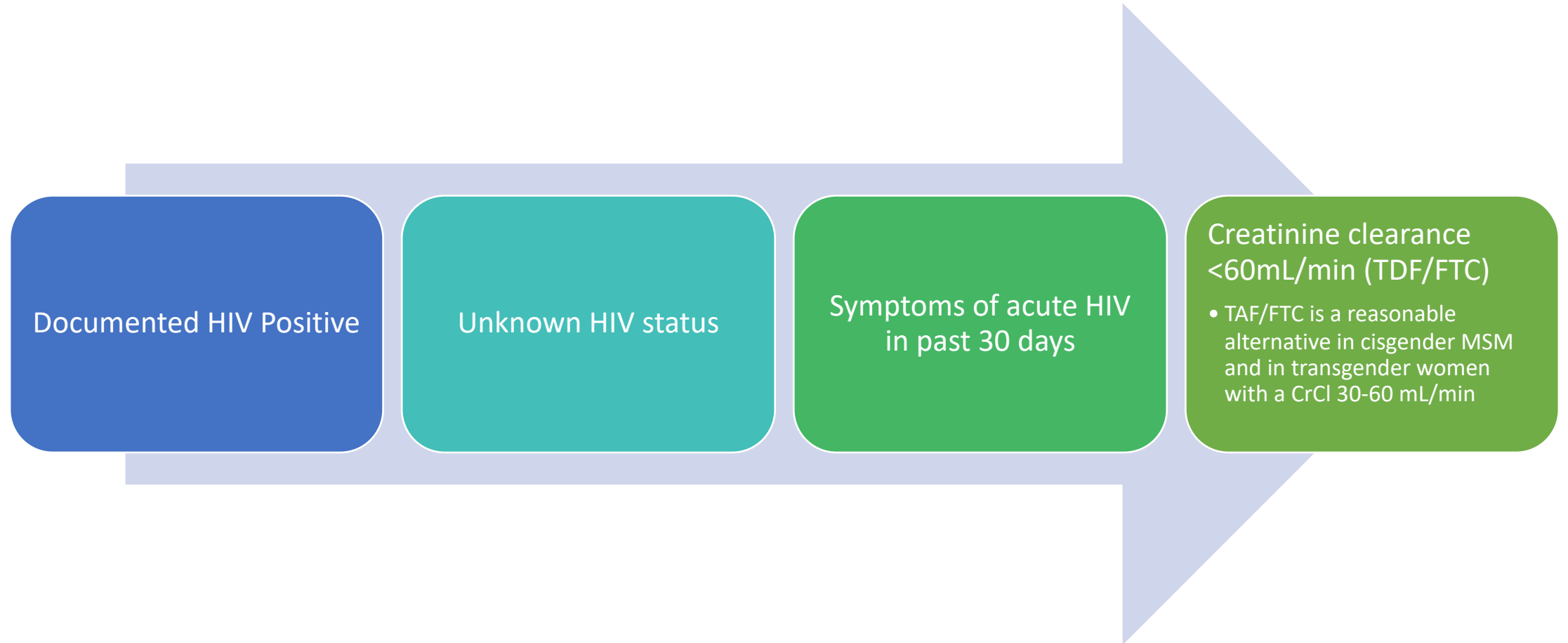




# Indications for PrEP – continued

- 
- Have been diagnosed with at least 1 bacterial sexually transmitted infection (STI) in the previous 6-12 months
  - Report recreational use of mood-altering substances during sex
  - Report injecting substances or having sex partners who inject substances, including illicit drugs, hormones, or silicone
  - Are receiving non-occupational post-exposure prophylaxis (nPEP) and anticipate ongoing risk or have used multiple courses of nPEP
  - Request the protection of PrEP even if their sex partners have an undetectable HIV viral load (although, U=U)
  - Self-identify as being at risk without disclosing specific risk behaviors
  - Acknowledge the possibility of or anticipate engaging in risk behaviors in the near future

# Contraindications for PrEP



# Taking a sexual history

- Sexual health can greatly impact overall quality of life
- A sexual history allows you to identify those individuals at risk for sexually transmitted infections (STIs), including HIV, and to identify appropriate anatomical sites for certain STI tests
- Provides an opportunity for risk-reduction counseling and sharing information about behaviors that may place your patient at risk of contracting STIs

# Taking a sexual history

- Many ways to illicit the necessary information!
- Some may prefer open dialogue, while others may prefer written response to predetermined questions
  - This applies to patients and providers
- Either way, let the patient know that you ask these questions of all adult patients, regardless of age, gender, gender identity, or marital status

# Examples of written responses

## Sexual Behaviors (Check all that apply)

6. Sex with...

- Men
- Women
- Both

7. Condom use?

- Never
- Sometimes
- Always

8. Number of sexual partners in the last 6 months?

- 5 or less
- 6 to 11
- 12 or greater

9. How do you find sexual partners?

- Dating/Hook-up Apps (Grindr, Tinder, etc.)
- Social Setting

- Social Media (Instagram, Facebook, Snapchat, etc.)
- Other (please specify)\_\_\_\_\_.

# Examples of written responses

## IV Drug Use

17. Ever injected?

- Yes
- No

18. Last time injected?

- 6 months or less
- 7 to 12 months
- 13 months or greater

19. Substance injected?

- |                                |  |
|--------------------------------|--|
| <input type="checkbox"/> Meth  | <input type="checkbox"/> Opiates           |
| <input type="checkbox"/> Other | <input type="checkbox"/> Prefer not to say |

20. Did you share injection equipment?

- Yes
- No

21. Have you ever had sex associated with alcohol or drug use?

- Yes
- No

# Examples of open dialogue

- Are your sex partners men, women, or both?
- How many sexual partners have you had in the past 6 months?
- Have you have ever had an STI?
- Do you use condoms every time you have sex?
- “Some STIs can be passed along from sites other than the genitals, like the throat and the rectum. So for these tests, we will need to do a throat and rectal swab.”

# Asking about drug use

## BOX A3: RISK BEHAVIOR ASSESSMENT FOR PERSONS WHO INJECT DRUGS<sup>68</sup>

- Have you ever injected drugs that were not prescribed to you by a clinician?
- *(if yes)*, When did you last inject unprescribed drugs?
- In the past 6 months, have you injected by using needles, syringes, or other drug preparation equipment that had already been used by another person?
- In the past 6 months, have you been in a methadone or other medication-based drug treatment program?



# Post-Test: Who is a good candidate for PrEP?

A

- A 28-year-old male is seen in the clinic. He reports having receptive condomless anal intercourse with two different men on the same night 6 weeks ago.

B

- A 44-year-old woman who regularly injects heroin. Since being cured of HCV, she no longer shares injection equipment, but will use her own needles repeatedly.

C

- A 19 year old male presents to the clinic requesting PrEP but will not disclose why he is requesting it.

D

- A 32 year old female in a mutually monogamous relationship with an HIV positive partner who has been virally suppressed for over 2 years presents requesting PrEP.

# Conclusions

Many indications for PrEP and few contraindications

More than one way to take a sexual history

- Approach will differ among patients and providers

Don't forget about substance use screening

# References

- Cherokee Nation Health Services PrEP Survey Tool, Pilot Form 01/2020
- Heffron R, Pintye J, Matthews LT, et al. PrEP as Peri-conception HIV Prevention for Women and Men. *Curr HIV/AIDS Rep* 2016;13(3):131-139.
- National HIV Curriculum.  
<https://www.hiv.uw.edu/page/qb/question/prevention/preexposure-prophylaxis-prep/6>
- Preexposure Prophylaxis for the Prevention of HIV Infection in the United States – 2017 Update Clinical Practice Guideline <https://www.cdc.gov/hiv/pdf/risk/prep/cdc-hiv-prep-guidelines-2017.pdf>
- Taking a Sexual History, CDC Publication: 99-8445.  
<https://www.cdc.gov/std/treatment/sexualhistory.pdf>
- Vail, R.M., with the Medical Care Criteria Committee, October 2019. PrEP to Prevent HIV and Promote Sexual Health: Clinical Guidelines Program, JHU School of Medicine, Division of Infectious Diseases. Retrieved from [https://www.hivguidelines.org/prep-for-prevention/prep/#tab\\_2](https://www.hivguidelines.org/prep-for-prevention/prep/#tab_2) on Jan. 8, 2020.