- This activity is jointly provided by Northwest Portland Area Indian Health Board and Cardea Services
- •
- Cardea Services is approved as a provider of nursing continuing 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 web-based training for a maximum of 1 AMA PRA Category 1 Credit(s)TM, 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# | 0130-9999-22-667-HO1-P, 1 ACPE CPE hrs. | Activity Type: Knowledge

There are no relevant financial relationships with ineligible companies for those involved with the ability to control the content of this activity.

#### **COMPLETING THIS ACTIVITY**

Upon successful completion of this activity 1 contact hour will be awarded

Successful completion of this continuing education activity includes the following:

- Attending the entire CE activity;
- Completing the online evaluation;
- Submitting an online CE request.

Your certificate will be sent via email. If you have any questions about this CE activity, contact Kat McLaughlin at kmclaughlin@cardeaservices.org



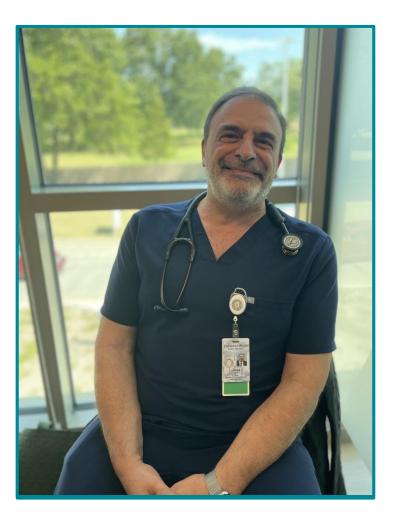
#### Pre-Exposure Prophylaxis 101 Providers have the Power

### **Presenter Bio**

#### Jorge Mera, MD, FACP

Cherokee Nation Health Services Director of Infectious Diseases

Faculty for Indian Country ECHO & UNM Project ECHO



### What is PrEP?

Protection for a person who is HIV negative who is at high risk of HIV exposure through sex or injection drug use



### What is PrEP?

#### PrEP can reduce risk of acquiring HIV by more than:

90% for sexual exposure

70% for injection drug use

Pills must be taken <u>every day</u> as prescribed for this level of effectiveness



### What PrEP is Not



#### **PrEP does not:**

- Reduce the need for other HIV prevention options
- Protect against other STIs

### **Available Medications for PrEP**

#### **Daily oral PrEP is recommended for:**

• All adults/adolescents at risk for HIV through sex or IDU





### **Available Medications for PrEP**

- Tenofovir disoproxil fumarate/ emtricitabine (TDF/FTC) has been used since 2012
- One pill once a day
  - >> On-demand use is an option





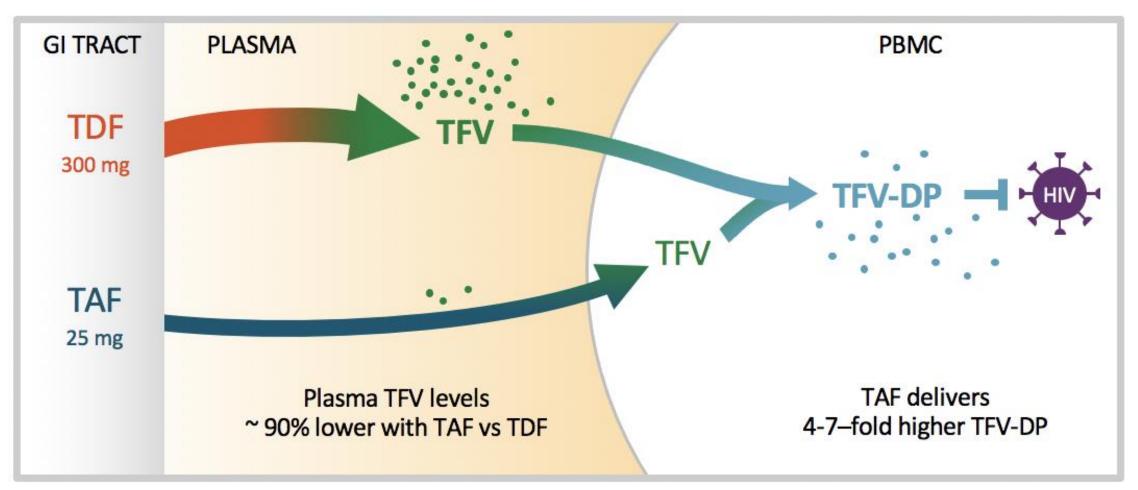
### Higher TFV-DP Levels in PBMCs with TAF vs TDF

#### **Tenofovir Alafenamide (TAF)**

- Pro-drug that can be absorbed quicker than TDF
- Can be prescribed in smaller doses, as higher levels of the active drug, tenofovir diphosphate, is seen in the cells



### Higher TFV-DP Levels in PBMCs with TAF vs TDF



Ruane. JAIDS. 2013;63:449. Sax. JAIDS. 2014;67:52. Sax. Lancet. 2015;385:2606.

### **Indications for PrEP**

#### For adults or adolescents weighing >35kg without acute or established HIV infection only

MSM	Heterosexual Men/Women	People Who Inject Drugs
<ul> <li>Any male sex partner in past 6 mos.</li> </ul>	• Any sex with opposite sex partner in past 6 mos.	<ul> <li>Any injection of drugs not prescribed by a clinician in past 6 mos.</li> </ul>
<ul> <li>Not in a monogamous relationship with a recently tested, HIV negative man</li> </ul>	<ul> <li>Not in a monogamous relationship with a recently tested, HIV negative partner</li> </ul>	

### **Indications for PrEP**

#### And at least 1 of these criteria

- Any anal sex without a condom in the past 6 mos.
- Bacterial STI (syphilis, gonorrhea, or chlamydia) in past 6 mos.
- Infrequent condom use with >1 partner(s) with unknown HIV status at substantial risk of HIV infection (PWID or MSM)
- Is in an ongoing relationship with HIV-positive partner with unsuppressed HIV-1 RNA
- Bacterial STI (syphilis, gonorrhea in females/males) in past 6 mos.

- Any sharing of injection/drug preparation equipment in past 6 mos.
- Risk of sexual acquisition

### Contraindications to TDF/FTC for PreP

Active HIV Infection	<b>Need HAART:</b> 3-active medications	
Renal Dysfunction	<b>TDF:</b> Do not start if CrCl <60 mL/min; Stop if CrCl <50 mL/min	
	<b>TAF:</b> If CrCl < 30 mL/min	
Allergy to TDF or FTC	Long Acting Cabotegravir	

**Caution** with active HBV infection as discontinuation of TDF/FTC can lead to hepatitis flair

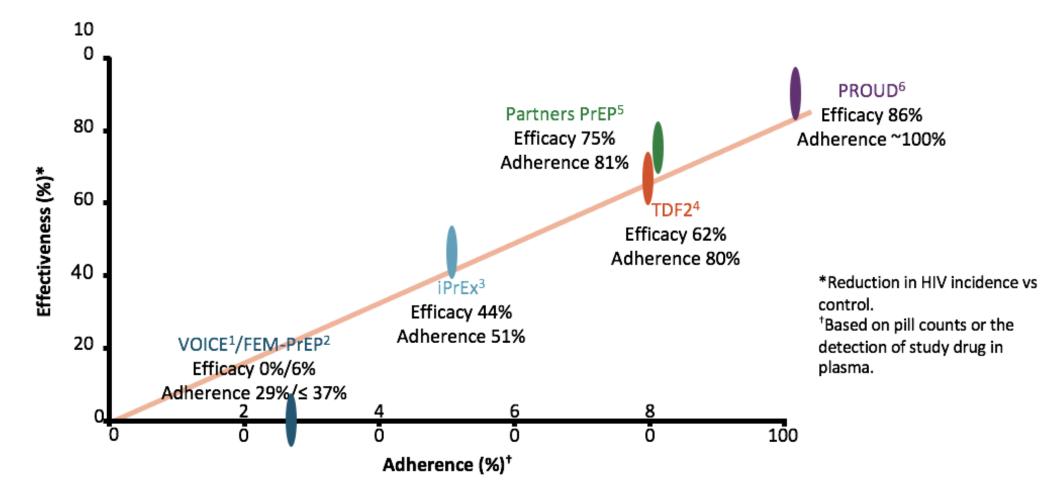
FTC/TDF: emtricitabine/tenofovir disoproxil fumarate; TAF: tenofovir alafenamide

https://www.cdc.gov/hiv/pdf/risk/prep/cdc-hiv-prep-guidelines-2017.pdf

### Once Daily Oral TDF-Based PrEP Efficacy in Clinical Trials

Population	Study	Study Drug	Control	Efficacy for Reducing HIV Incidence, %
MSM	iPrEx <sup>1</sup>	FTC/TDF (n = 1251)	Placebo (n = 1248)	<b>44.0</b> ( <i>P</i> = .005)
HS men &	Partners PrEP <sup>2</sup>	FTC/TDF (n = 1583)	Placebo (n = 1586)	<b>75.0</b> ( <i>P</i> <.001)
women	TDF2 <sup>3</sup>	FTC/TDF (n = 611)	Placebo (n = 608)	<b>62.2</b> ( <i>P</i> = .03)
PWID	BTS <sup>4</sup>	TDF (n = 1204)	Placebo (n = 1207)	<b>48.9</b> ( <i>P</i> = .01) If detectable TDF: 73.5 ( <i>P</i> = .03)

### Effectiveness Improves with Adherence



Marrazzo. NEJM. 2015;372:509.
 Van Damme. NEJM. 2012;367:411.
 Grant. NEJM. 2010;363:2587.
 Thigpen. NEJM. 2012;367:423.
 Baeten. NEJM. 2012;367:399.
 McCormack. Lancet. 2016;387:53.



# Summary of PrEP Eligibility

Risk Group	Daily FTC/TDF	On-Demand (2:1:1) FTC/TDF	Daily FTC/TAF	
MSM	<b>Approved</b> , guideline recommended	<mark>Off-label</mark> , guideline recommended	Approved Approved	
TG women	<b>Approved</b> , guideline recommended	<b>Off-label</b> , <u>not</u> recommended		
Heterosexual women	<b>Approved</b> , guideline recommended	<b>Off-label</b> , <u>not</u> recommended	<b>Off-label</b> , <u>not</u> recommended, studies underway	
Heterosexual men	<b>Approved</b> , guideline recommended	<b>Off-label</b> , <u>not</u> recommended	Approved	
TG men	<b>Approved</b> , guideline recommended	<b>Off-label</b> , <u>not</u> recommended	<b>Off-label</b> , <u>not</u> recommended (unless risk from anal sex only)	
PWID	Approved, guideline recommended	<b>Off-label</b> , <u>not</u> recommended	<b>Off-label</b> , <u>not</u> recommended	

FTC/TAF PI. FTC/TDF PI. Saag. JAMA. 2020;324:1651. Tan. CMAJ. 2017;189:E1448. WHO. apps.who.int/iris/bitstream/handle/10665/325955/WHO-CDS-HIV-19.8-eng.pdf.

# Long-Acting Cabotegravir (CAB LA)

#### **Details:**

- Injectable integrase inhibitor
- Administered every 8 weeks
- FDA approved for MSM and transgender women
- Safety similar to that of TDF-FTC

Except for injection site side effects leading to discontinuation, which occurred in 2.4% of patients receiving it vs none in the placebo group during the clinical trial

### In Our Next Talk

#### We will discuss:

- Approaching patients who are candidates for PrEP
- Concerns re: how many PrEP patients a facility might have

**Spoiler:** <u>not</u> as many as you might think

• Concerns re: cost

**Spoiler:** generic TDF/FTC is available



## **IHS HIV Project ECHO**

#### **Monthly IHS telemedicine conference:**

- Sponsored by University of New Mexico and IHS
- Twenty-minute didactic talk regarding HIV care
- Participants present 2-3 active cases

#### When?

• 2nd Wednesday of the month @ 12pm MT

#### IHSECHO@unm.salud.edu



### **HIV/AIDS Warmline**



NATIONAL CLINICIAN CONSULTATION CENTER Translating science into care		-	The National Clinician Consultation Center is a free telephone advice service for clinicians, by clinicians. Go to <b>nccc.ucsf.edu</b> for more information.			
	HIV/AIDS Warmline 800-933-3413	HIV treatment, ARV management, complications, and co-morbidities	Perinatal HIV Hotline 888-448-8765		Pregnancy, breastfeeding and HIV	
	Hepatitis C Warmline 844-HEP-INFO/ 844-437-4636	HCV testing, staging, monitoring, treatment		Substance Use Warmline 855-300-3595	Substance use evaluation and management	
	PrEPline 855-HIV-PrEP	HIV Pre-exposure prophylaxis		PEPline 888-448-4911	Occupational & non- occupational exposure management	

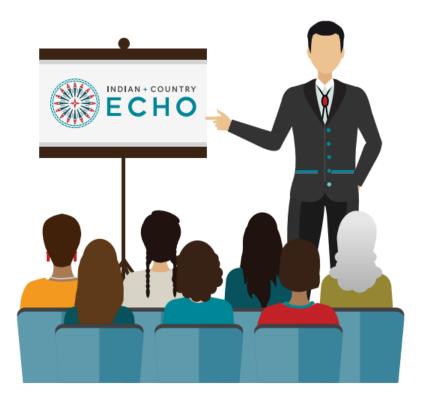
This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U10HA30039 (AIDS Education and Training Centers National Clinician Consultation Center) in partnership with the Centers for Disease Control and Prevention awarded to the University of California, San Francisco.

### Indian Country ECHO

#### **Free service for I/T/U clinicians:**

Designed to enhance care delivery for patients with complex conditions

**The variety of services include:** Online ECHO clinics, trainings, CE, and technical assistance & capacity building



### **Virtual ECHO Clinics**

#### **During ECHO clinics you can:**

- Participate in didactic and case presentations
- Receive recommendations from peers and a team of specialists
- Join a learning community

Join us!



#### More Information & To Get Connected

#### IndianCountyECHO.org

# For free technical assistance: ECHO@npaihb.org



