

PrEP ROLL-OUT IN LATIN AMERICA SHOULD AIM TO INCREASE AWARENESS AMONG ELIGIBLE INDIVIDUALS TO PREVENT REFUSAL, AND PROVIDE SUPPORT TO NEW USERS TO PREVENT EARLY DISCONTINUATION

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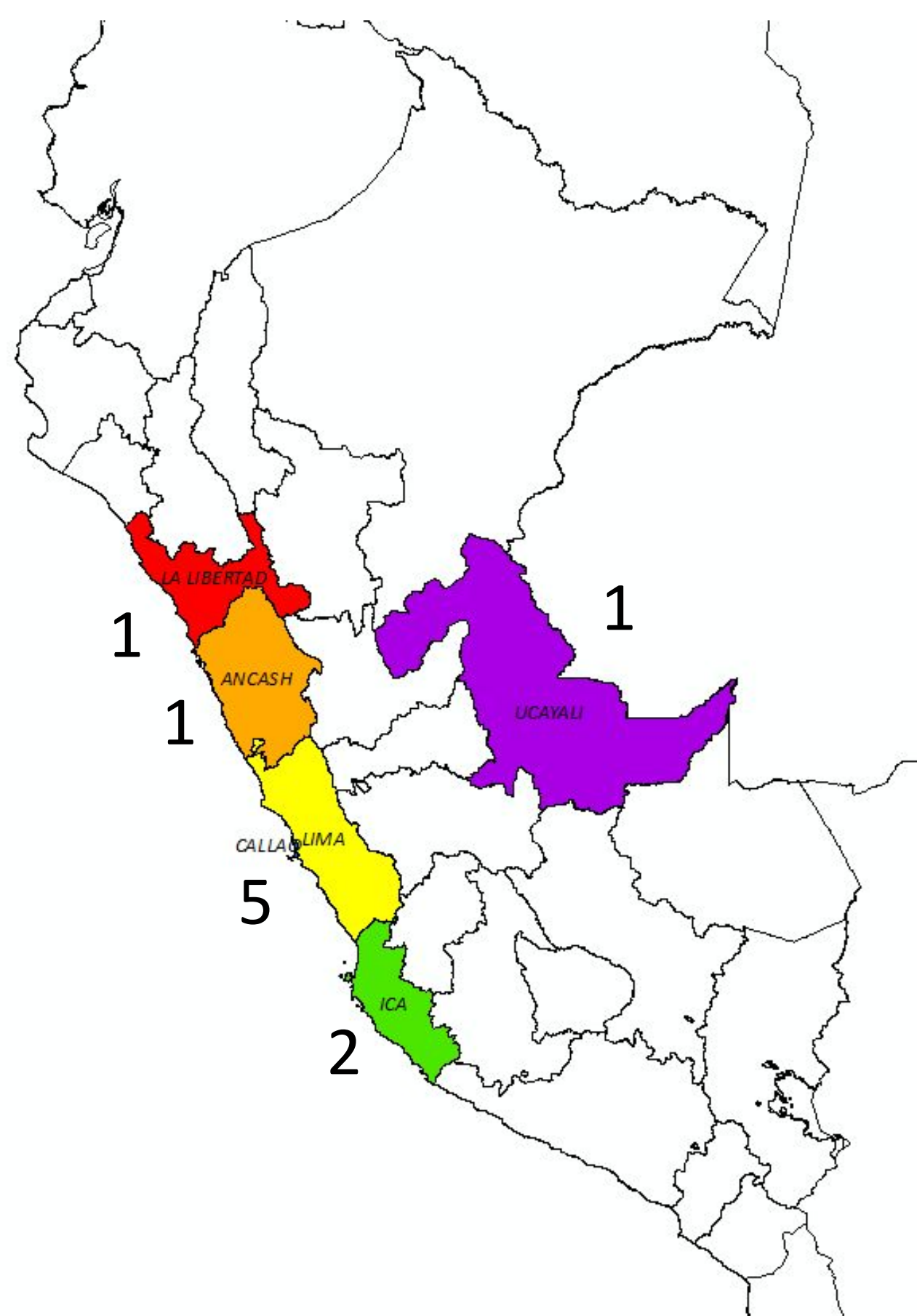
Background:

- Despite the high efficacy of HIV PrEP, its roll-out has been slow globally. While free PrEP programs In Latin America are finally being set-up, uptake and/or continuation may be sub-optimal, implying a loss of prevention opportunities.
 - We assessed the occurrence and reasons of PrEP refusal in the Peru component of ImPrEP, a PrEP implementation project.
 - We also assessed the occurrence and reasons of early discontinuation among acceptors.
- Eligible subjects (i.e. HIV-, reporting either condomless anal sex with unknown partners, or sex work, or STIs, or HIV+ partners) came either for HIV testing or to ask about PrEP.
 - They were offered PrEP; those who refused (Refusers) responded a short survey about reasons for refusal; those who accepted (Acceptors) were enrolled and asked to return in 30 days.
 - Qualitative interviews were conducted with refusers, ongoing users and early discontinuers (defined as those who missed their 30-day visit within a 60-day window).

Methods:

- Since 2018 ImPrEP has been enrolling eligible, adult MSM and transwomen (MSM/TW) for daily oral PrEP use in 9 public and one private STI clinic in Peru (figure 1).

Figure 1: Peru sites



Results:

- Until 31 December 2019, 2732 eligible MSM/TW were invited to enroll in ImPrEP, of whom 2128 (80%) enrolled, and 532 (20%) refused participation.

Figure 2: Gender/Sexuality

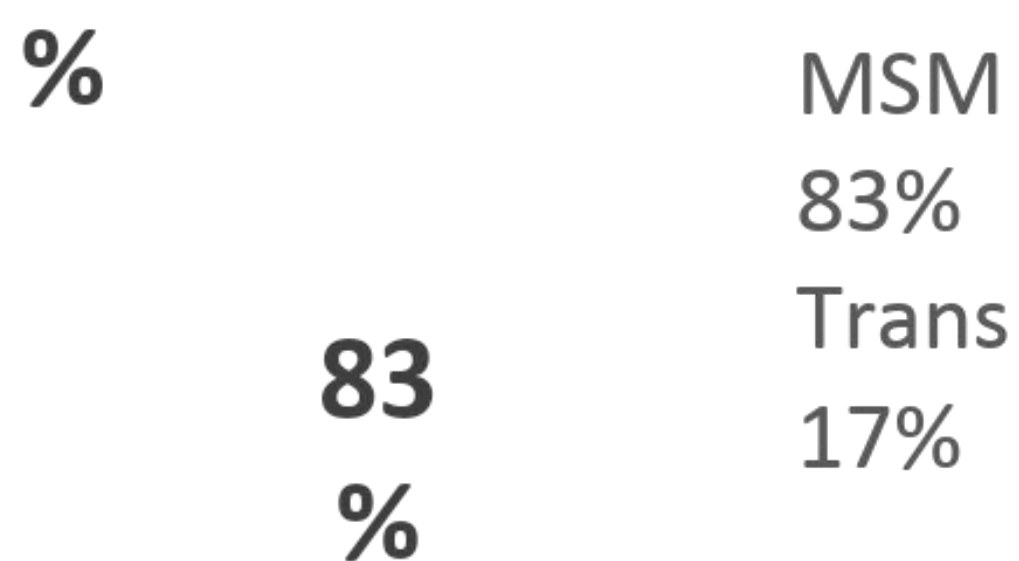
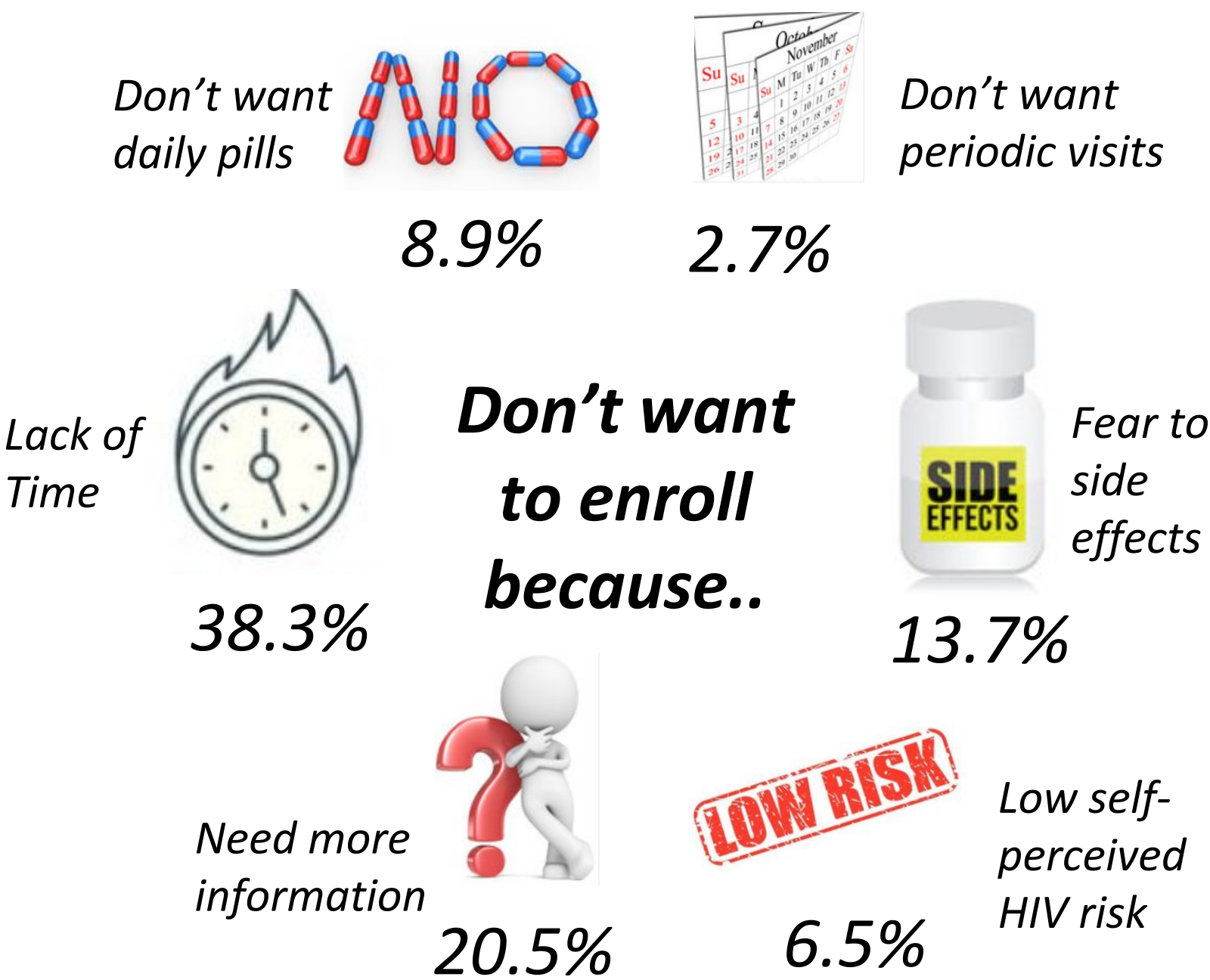


Figure 3: Why participants do not want to enroll?



- Among refusers, in last 6 months:
 - 25.9% reported condomless intercourse with HIV+ partner
 - 37.1% reported sex work or transactional sex
 - 38.7% reported monthly income below 250 USD (Minimun wage)
- Of those 2128 who enrolled, 1940 were eligible (91.2%). Of this total, 68.3% (N=1301) returned to their first follow-up visit within 15-60 days after enrollment (i.e. **early engagement**).

- Similar to reasons for refusal (figure 3), reasons identified for early discontinuation are shown in figure 4:

Figure 4: Why did participants discontinue PrEP early?

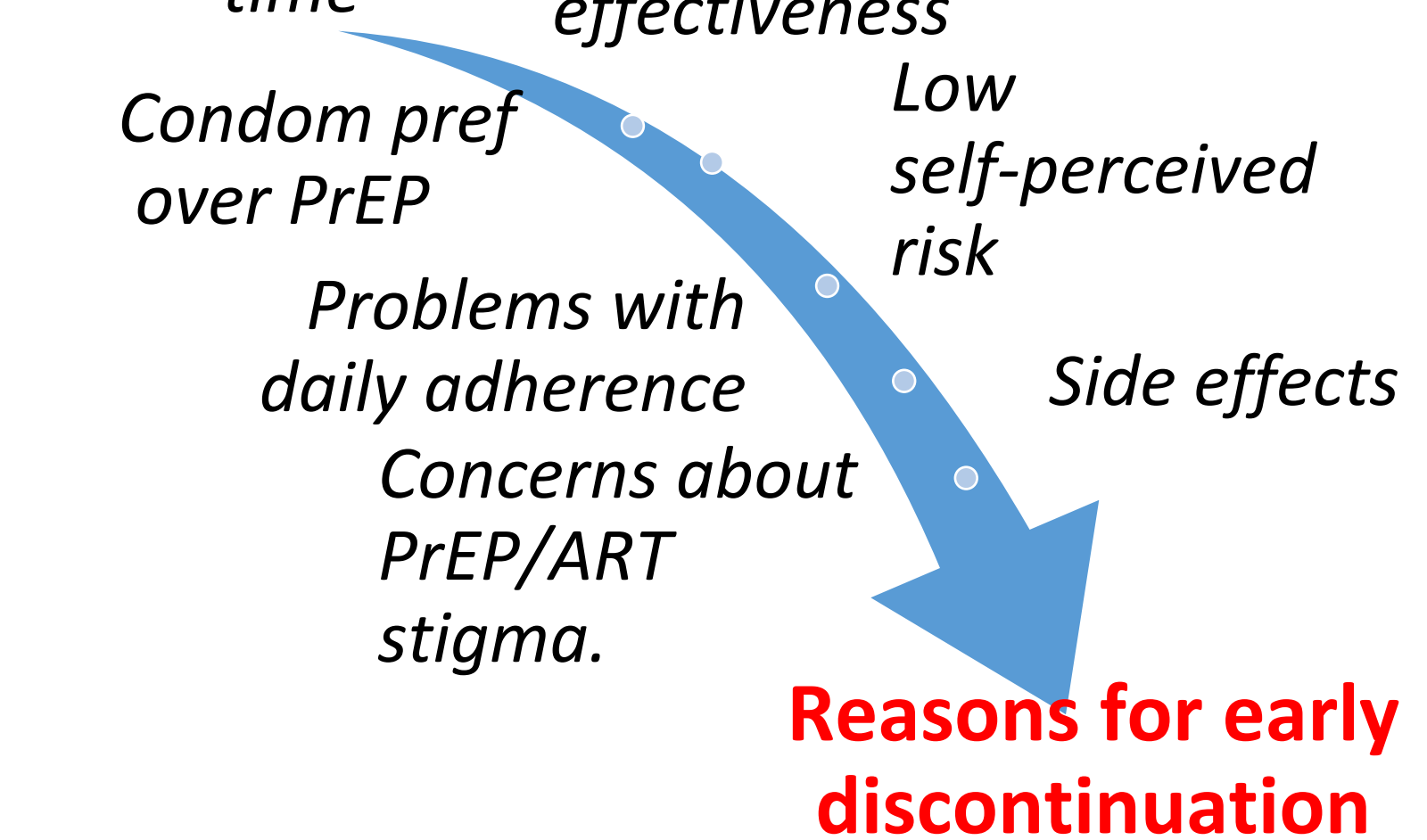


Table: Perception of risk and sexual behavior of non-enrolled participants

Considering your sexual practices, in your opinion, what would be your risk of contracting HIV during the next 12 months?	%
None	7.9%
Low risk	42.6%
Some risk <50%	33.2%
High risk	12.0%
Sure I'm going to get it	1.0%
I don't know or I don't want to answer	3.3%
Total	100%
In the last 6 months, how often have you used a condom in your sexual relationships?	
Never	4.6%
Less than half the time	16.8%
Half the time	15.5%
More than half the time	37.7%
Every time	25.4%
Total	100%
In the last 6 months, have you exchanged sex for money, gifts, accommodation, or drugs?	
Yes	37.1%
No	62.9%
Total	100%
In the last 6 months, how many times have you had receptive or insertive anal sex without a condom with an HIV positive man or transwoman?	
None	71.3%
Once	0.6%
1 to 4 times	17.7%
2 or more times	0.4%
5 times or more	6.5%
I don't know	0.8%
I do not want to answer	2.7%
Total	100%

Conclusions:

- Of 10 eligible MSM/TW who are offered PrEP, 2 refuse; and of 10 who enroll, 3 discontinue early. Both refusal and early discontinuation may reflect natural reactions to PrEP roll-out in contexts of low awareness.
- Emerging PrEP programs should actively provide PrEP information to refusers to help them reconsider PrEP use, and support acceptors to prevent early discontinuation.