

2024 HIV PEP Update

PrEP Learning Collaborative

May 2nd, 2024



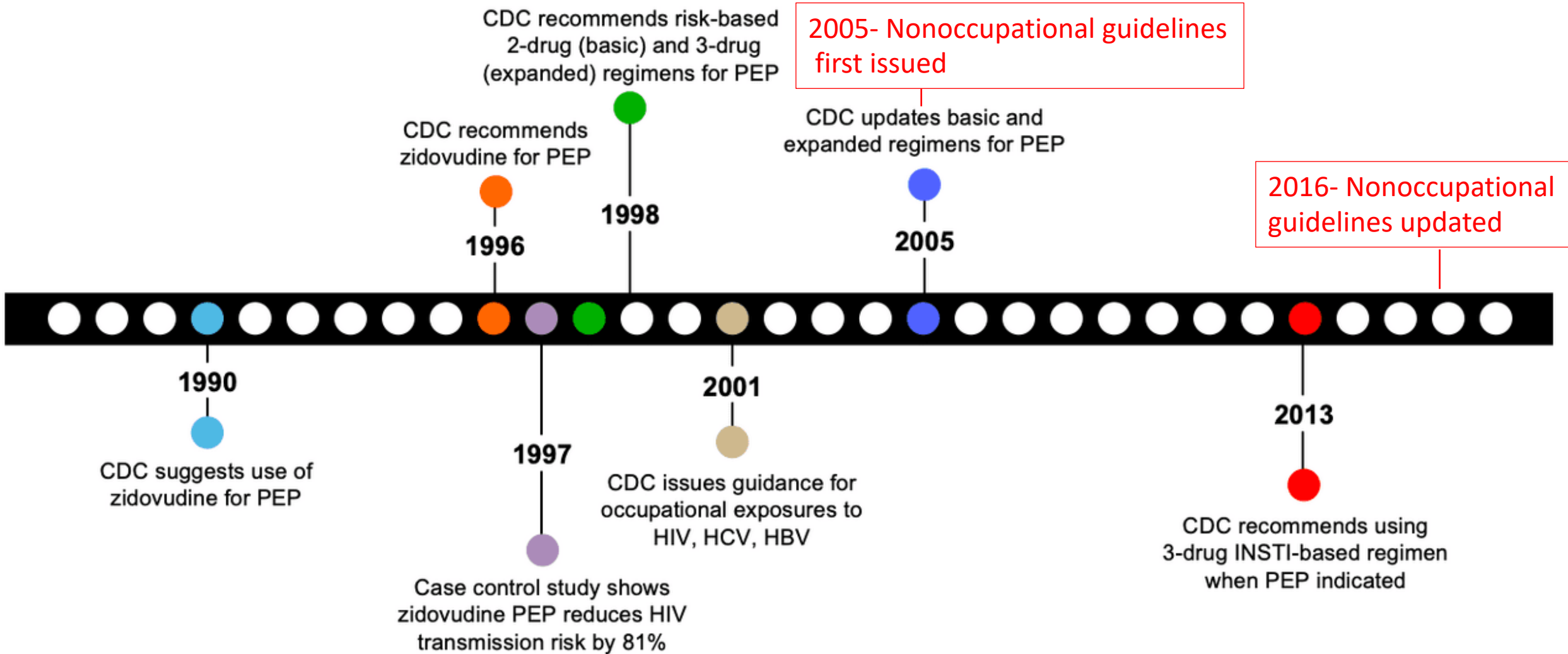
Session agenda

- Intro & 2016 CDC guideline overview
- San Francisco, CA: STI Clinic
- St Louis, MO: University Health System
- California: State-wide Tele-PEP
- Oregon & Washington: Legislation
- Q&A

What is HIV PEP?

- Oral antiretroviral medications taken to prevent HIV acquisition *after* known or possible exposure to HIV
- Started within 72 hours of the exposure (sooner is better)
- Taken for 28 days

Timeline for Occupational PEP Recommendations in the United States



Likelihood of HIV Acquisition by Exposure Act

The table below lists the risk of transmission per 10,000 exposures for various types of exposures.

Estimated Per-Act Probability of Acquiring HIV from an Infected Source, by Exposure Act*

| Type of Exposure | Risk per 10,000 Exposures |
|--|---------------------------|
| Parenteral | |
| Blood Transfusion | 9,250 |
| Needle-Sharing During Injection Drug Use | 63 |
| Percutaneous (Needle-Stick) | 23 |
| Sexual | |
| Receptive Anal Intercourse | 138 |
| Insertive Anal Intercourse | 11 |
| Receptive Penile-Vaginal Intercourse | 8 |
| Insertive Penile-Vaginal Intercourse | 4 |
| Receptive Oral Intercourse | Low |
| Insertive Oral Intercourse | Low |
| Other^ | |
| Biting | Negligible |
| Spitting | Negligible |
| Throwing Body Fluids (Including Semen or Saliva) | Negligible |
| Sharing Sex Toys | Negligible |

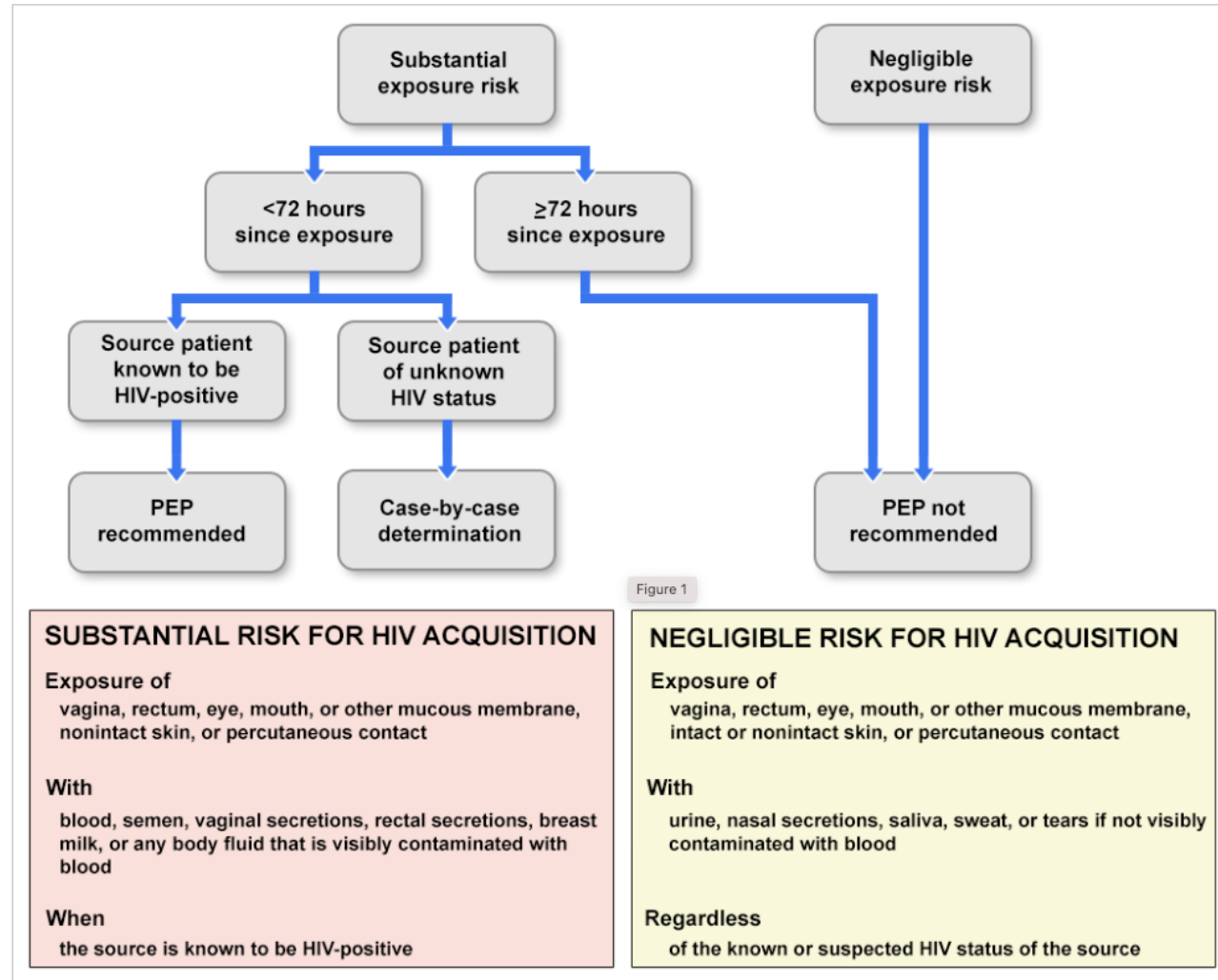
Factors that increase risk:

- STIs
- Acute HIV infection
- Late-stage HIV infection
- High HIV viral load
- Trauma to tissue

Factors that decrease risk

- Antiretrovirals
 - Treatment
 - HIV PrEP
- Condom use
- Male circumcision

Algorithm for evaluation and treatment of possible nonoccupational HIV exposures



HIV post-exposure Prophylaxis (nPEP): 2016 CDC Guidelines

Assess Risk for HIV Acquisition

- Evaluate exposure risk
- If “Substantial Risk”
 - **Recommend:** source known to be HIV positive
 - **Case-by-case:** HIV status of source is unknown

Baseline Labs

- HIV Ag/Ab or Ab if Ag/Ab unavailable
- Hep B serology panel; Hep C ab
- Creatinine, AST, ALT
- STI: Syphilis, gonorrhea, chlamydia
- Pregnancy

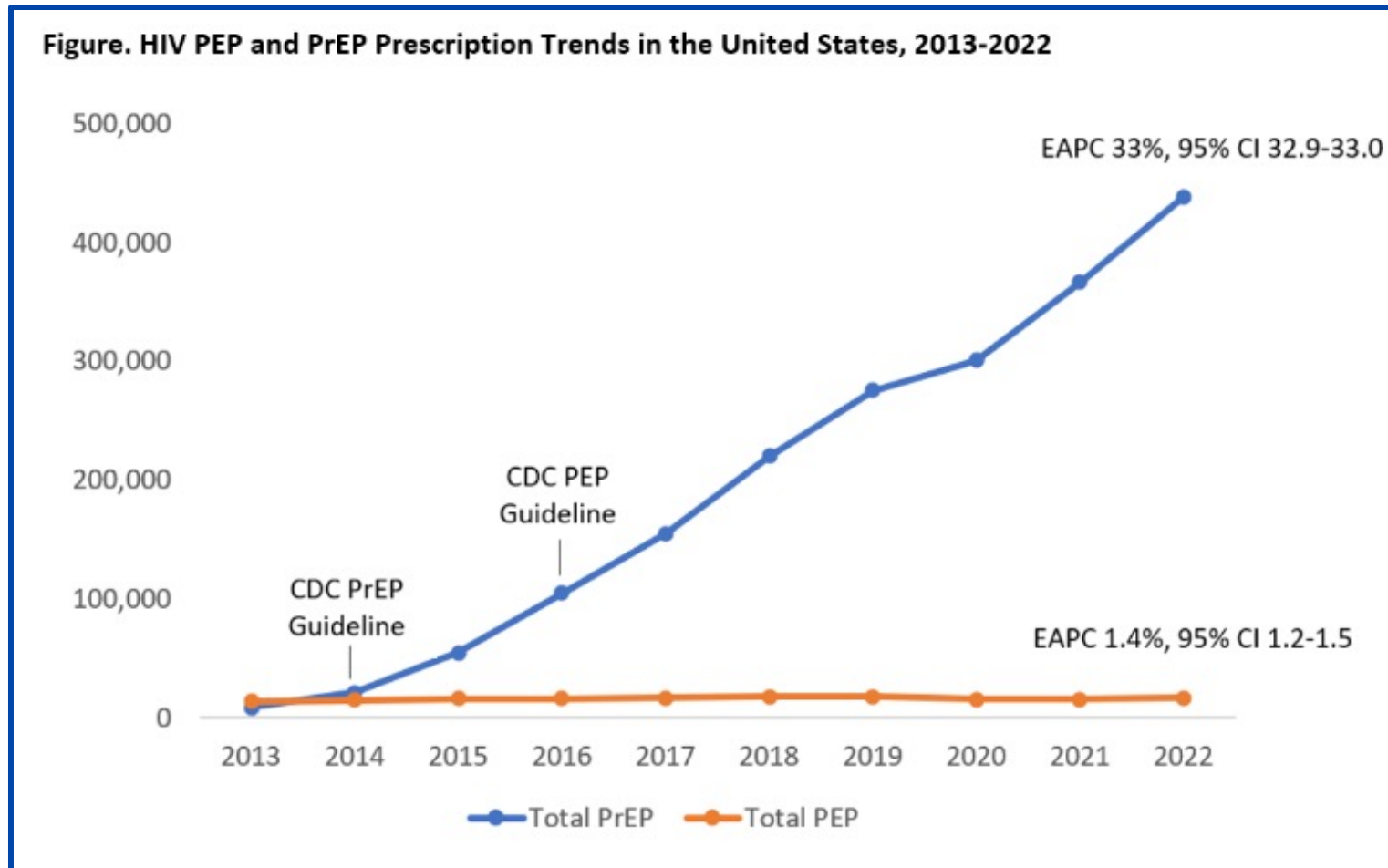
HIV PEP: Preferred regimens

- TDF/FTC PLUS raltegravir (Isentress)
 - OR
 - TDF/FTC PLUS dolutegravir (Tivicay)
- 28 DAYS**

Follow Up labs

- **4-6 wks:** HIV Ag/Ab, STIs, preg, creatinine, AST/ALT
- **3 mos:** HIV Ag/Ab
- **6 mos:** HIV Ag/Ab, Hep B panel, Hep C ab, syphilis

Prescription trends: PEP vs PrEP



HIV PEP Resources



Call National Clinician's Post-Exposure Prophylaxis Hotline (PEP Line) 1-888-448-4911 with any PEP/HIV related questions

<https://nccc.ucsf.edu/clinician-consultation/pep-post-exposure-prophylaxis/>



<https://www.hiv.uw.edu/>



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Non-Occupational Post-Exposure Prophylaxis (nPEP) Toolkit

<https://aidsetc.org/resource/npep-toolkit>



PrEP Learning Collaboratives

Resources and information for building capacity in PrEP access and care.

<https://californiaptc.com/prep-learning-collaboratives/>