

# Factors associated with transitioning from post-exposure prophylaxis to pre-exposure prophylaxis at the Thai Red Cross Anonymous Clinic in Bangkok, Thailand: A five-year observational cohort

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PREVENTION | Thai Red Cross AIDs Research Centre



# Conflicts of Interest

- None




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# Outline

- Background
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  - Conclusion
  - Challenges
  - Next steps
- 

# Background

- Post-exposure prophylaxis (PEP) and pre-exposure prophylaxis (PrEP) are highly effective antiretroviral-based measures in the combination HIV prevention package.
- PEP is offered to individuals within 72 hours of risk exposure
- PrEP is a preferred choice for those with on-going HIV susceptibility
- The decision to transition from PEP to PrEP has not been well investigated

# Objectives

- To assess proportions of PEP users who transitioned to use PrEP at the Thai Red Cross Anonymous Clinic
- To examine factors correlated with this transition

# Methods

- PEP Clients from TRCAC from January 2014 till December 2018. (N=9,047)
- Fee-based PrEP Service introduced in December 2014
- Demographics and Behavioral information : self-reported
- Observational retrospective cohort study

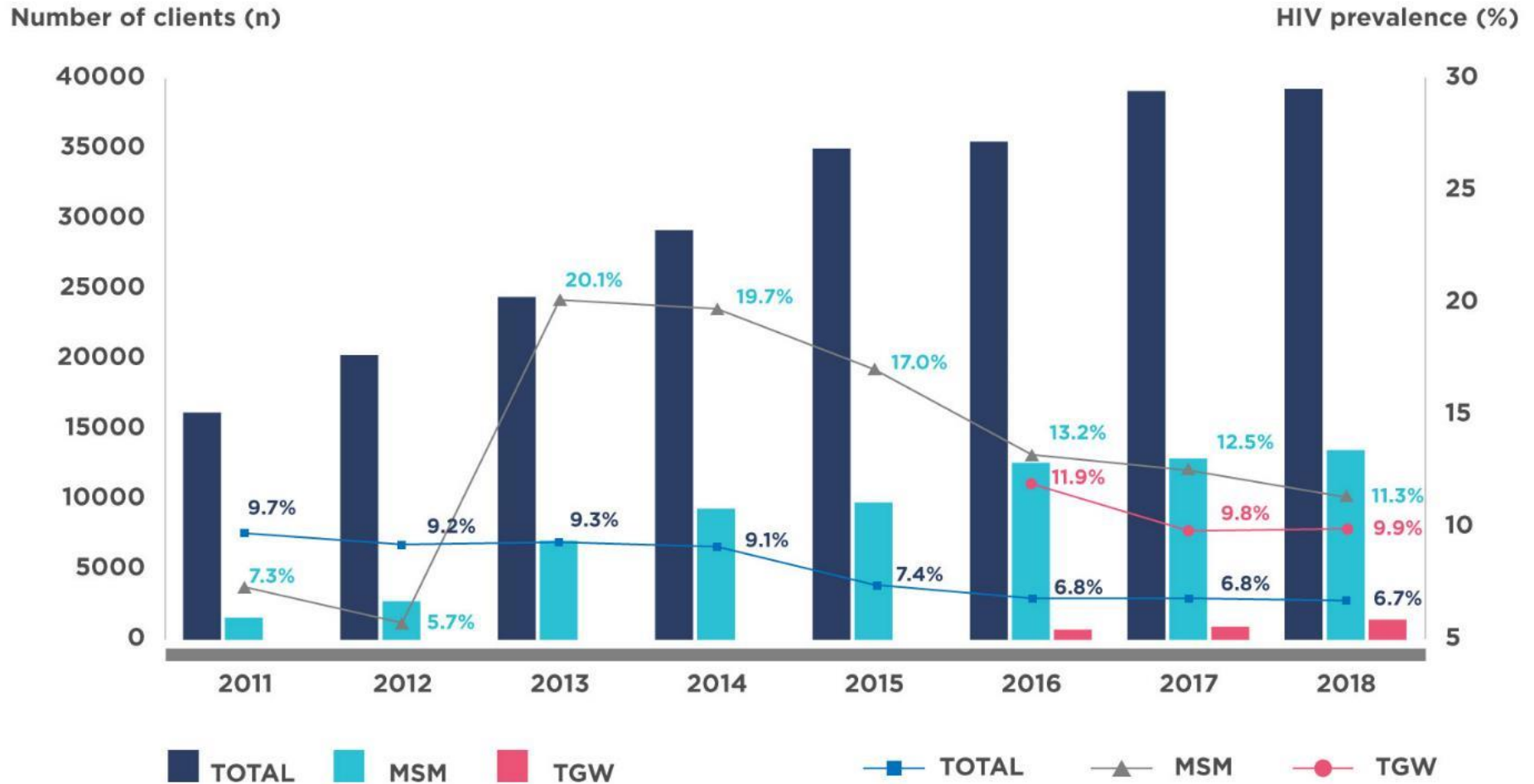
# Thai Red Cross Anonymous Clinic



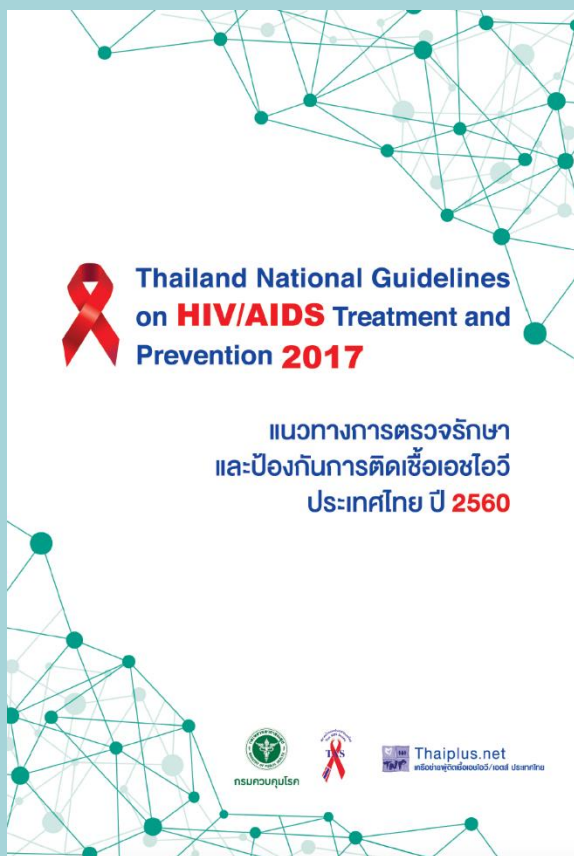
- Large HIV and STI testing center
- Provides research-based HIV and STI services
- Stand-alone VCT



# Thai Red Cross Anonymous Clinic

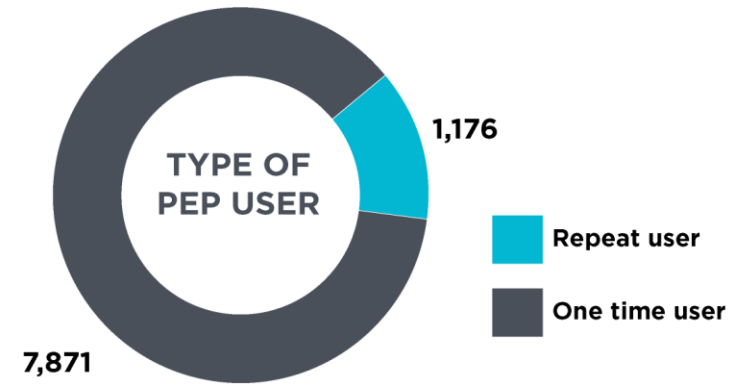
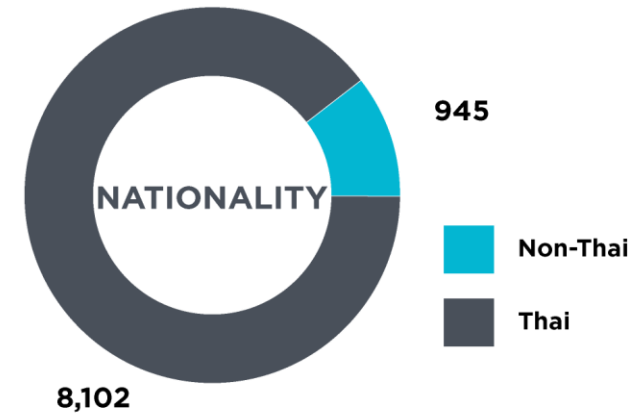
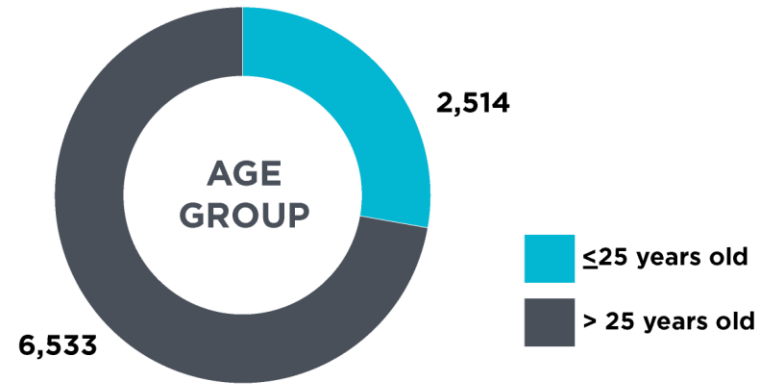
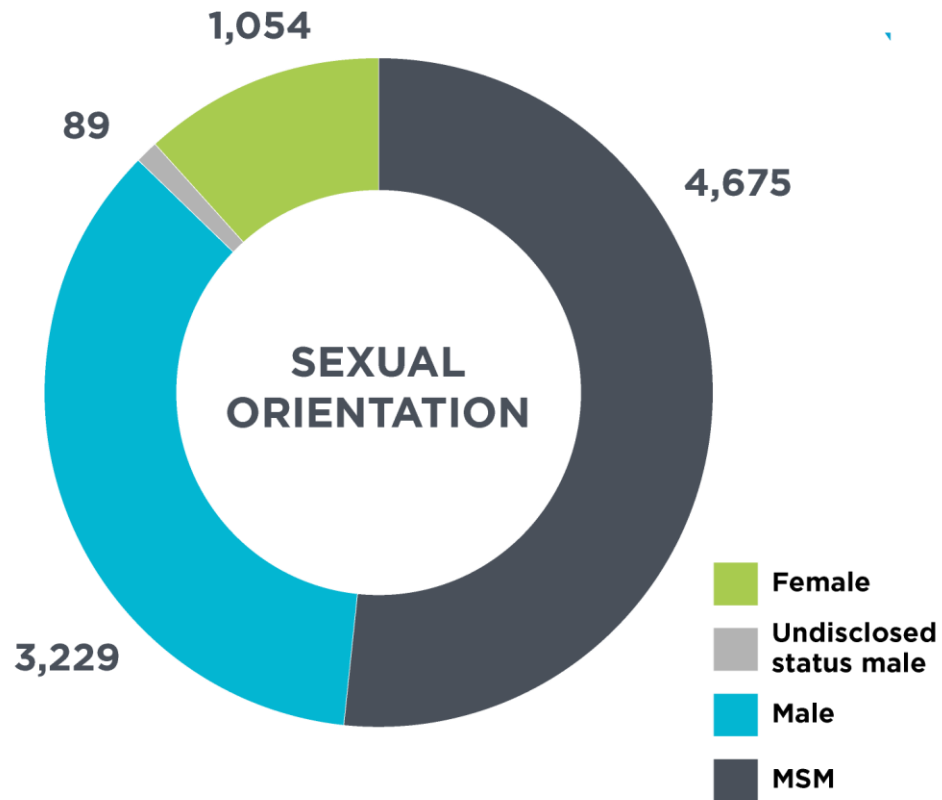


# National Guidelines for PEP

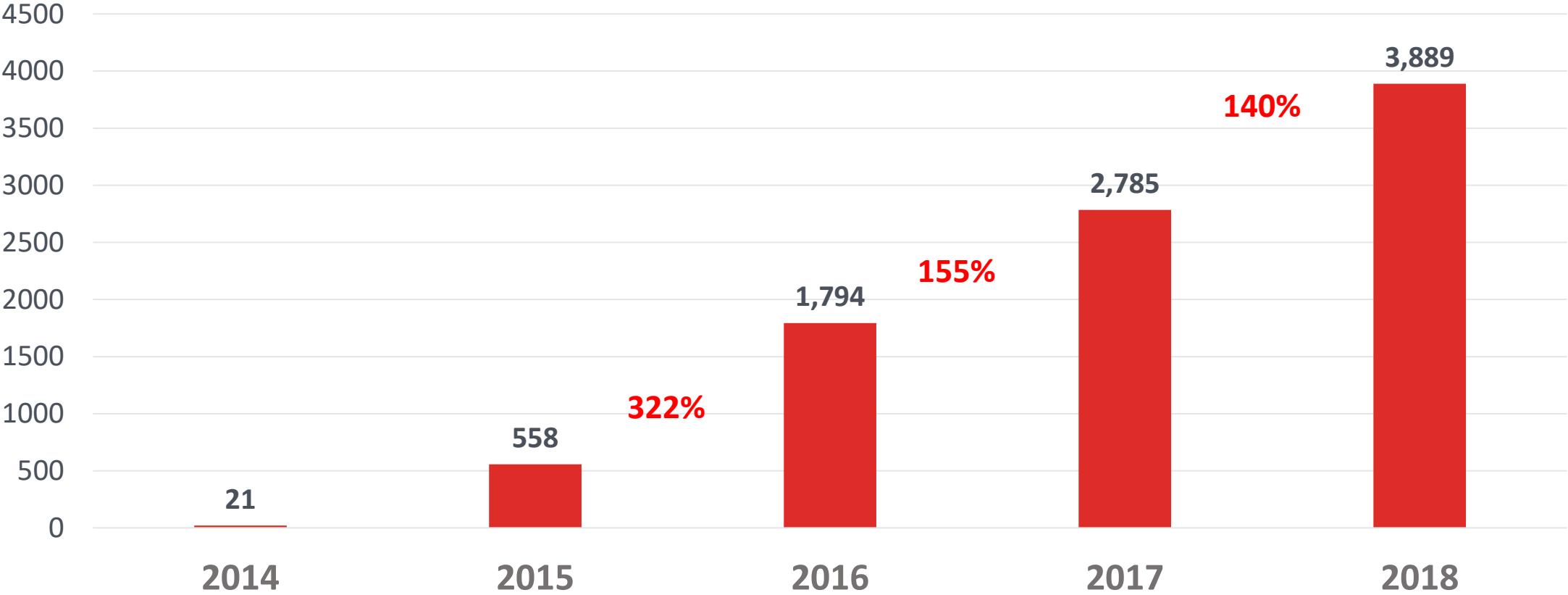


- First line drug regimen for PEP
  - Tenofovir Disoproxil Fumarate
  - Emtricitabine
  - Rilpivirine

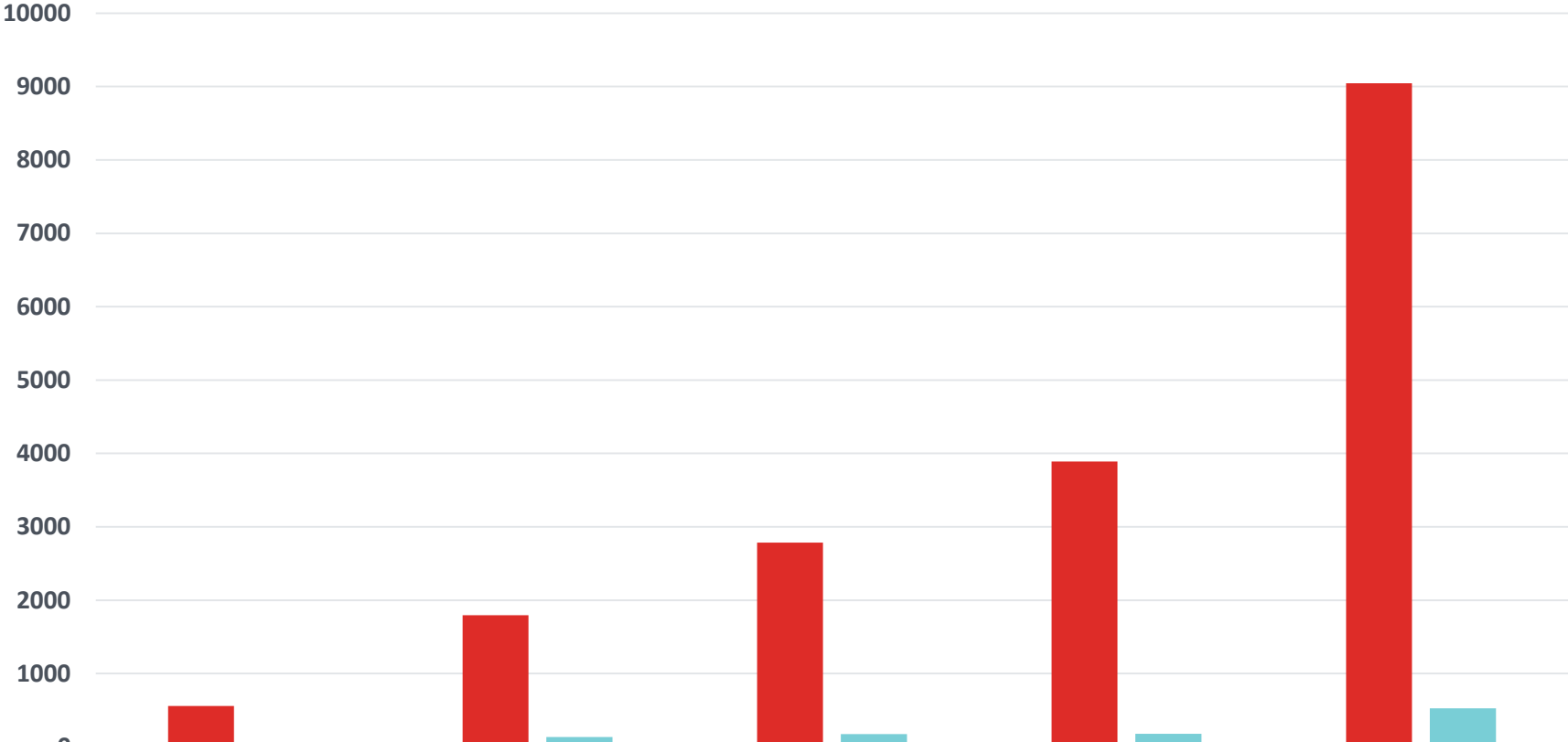
# Baseline demographic and risk characteristics of PEP uses in Anonymous Clinic Bangkok, Thailand



# Year of First PEP Initiation



# Transitioning to PrEP



	2015	2016	2017	2018	Total
<b>Cumulative First time PEP users</b>	558	1794	2785	3889	9047
<b>Proportions of Clients Transitioned</b>	6.4%	7.5%	6.3%	4.6%	5.8%

# Transitioning to PrEP

Year	Cumulative first time PEP users at Anonymous Clinic	Transitioning into PrEP			
		Proportions of Clients Transitioned N (%)		Median Days between PEP and PrEP (IQR)	
2014	21	0 (0)	P < 0.001	-	P < 0.001
2015	558	36 (6.45)		257 (86-546.5)	
2016	1794	135 (7.53)		130 (29-412)	
2017	2785	176 (6.32)		91 (32-241.5)	
2018	3889	181 (4.65)		35 (29-92)	
Total	9047	528 (5.84)		75.5 (29-208)	

# Factors associated with Transitioning from PEP to PrEP

Covariates	aOR	95% CI	P-value
Type of PEP user			
One time user	1.00		
Repeat user	4.47	(3.69 -5.41)	<0.001
Sexual Orientation			
Heterosexual male	1.00		
MSM	5.57	(4.17 -7.45)	<0.001
Undisclosed status male	4.01	(1.73 -9.27)	<0.001
Female	1.98	(1.27 -3.07)	<0.002
Age Group			
Age ≤ 25 years	1.00		
Age >25 years	2.01	(1.59 -2.52)	<0.001
Nationality			
Thai	1		
Non-Thai	1.81	(1.38-2.37)	<0.001

# Seroconversions after PEP

Duration between PEP completion and seroconversion	N (%)
0 - 30days	1 (1.9%)
31 - 60days	1 (1.9%)
61 - 180days	13 (24.5%)
181 - 360days	18 (34%)
> 360days	20 (37.7%)
Total	53



# Conclusion

- Number of PEP users has continued to rise after the introduction of PrEP
- Proportions of clients who switched to PrEP are declining over years
- However, time to transition has become significantly shorter
- This could reflect increasing PrEP clinical service skills among counselors and PrEP awareness among certain groups of clients
- Interventions to increase PEP to PrEP transition are urgently needed
- Targets should include young people, heterosexual men and Thais

# Challenges & Next Steps

- Urgency to increase PrEP awareness among general population at large
- Availability of PrEP under universal health coverage scheme
- Future studies on those who transitioned from PEP to PrEP:
  - Qualitative analysis assessing facilitators and barriers to access PrEP
  - Self perceived risks of PEP users
  - Populations who were more vulnerable to seroconvert



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**THANK YOU**