

PrEP interest, eligibility and initiation by MSM and transwomen in Cape Town and Port Elizabeth, South Africa



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Background

Men who have sex with men (MSM) and transgender women (transwomen) experience high rates of HIV infections globally.

Pre-exposure prophylaxis (PrEP) is an efficacious prevention modality, and tenofovir-emtricitabine is approved for PrEP in South Africa.

However, PrEP implementation for MSM in South Africa has been largely limited to randomized clinical trials.

Methods

The **Sibanye Health Project** is a one-year prospective cohort study of combination HIV prevention for MSM/transwomen in Cape Town (CT) and Port Elizabeth (PE), South Africa.

Recruitment was conducted through outreach in community settings.

The prevention package includes condom choices, lubricant choices, couples voluntary counseling and testing, sexually transmitted infection screening and treatment, PrEP for eligible persons, and post-exposure prophylaxis.

Standard visits for prospective follow-up occur at baseline, 3, 6 and 12 months.

Participants could be screened for PrEP interest and behavioral eligibility at baseline or 3 months, and initiate one month later after confirming clinical eligibility.

At baseline, participants were tested for HIV using the provincially approved algorithm.

Demographic, behavioral, and clinical data were collected by study staff and through tablet-administered surveys.

Overall and by city, we describe the proportions of MSM/transwomen who were interested in initiating PrEP, met behavioral criteria, met clinical criteria, and started PrEP.

Initiation by age, race, and city were assessed using chi-square tests.

Results

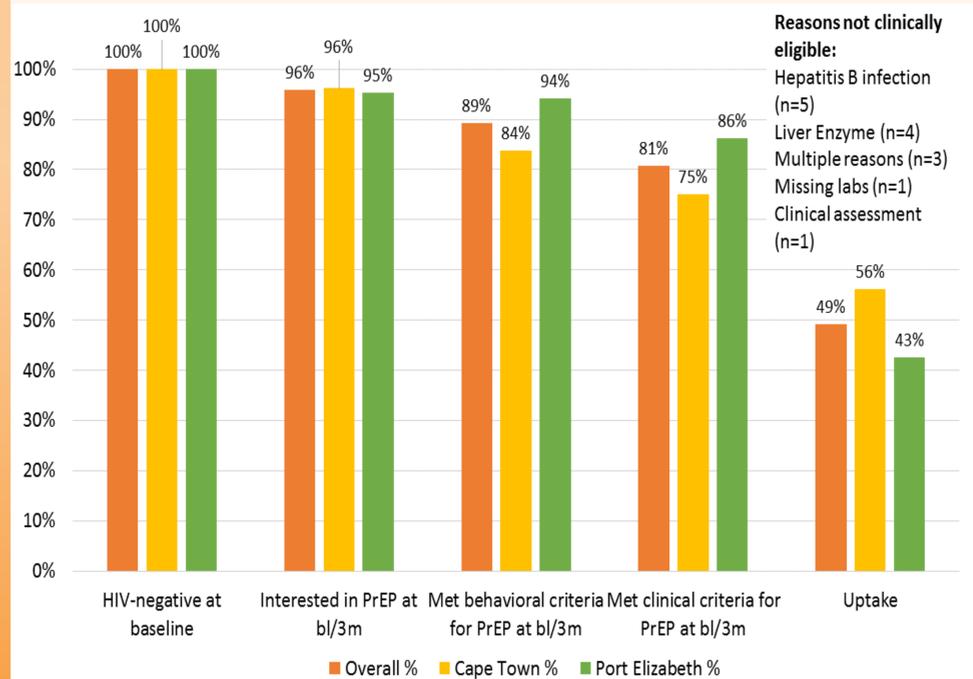
From February through September 2015, 292 participants were enrolled (115 in CT and 177 in PE) of whom 167 (80 in CT and 87 in PE) were HIV-negative and were enrolled in the prospective cohort study.

Among 167 HIV-negative participants
 96% (n=160) were interested in PrEP
 89% (n=149) met behavioral criteria
 81% (n=135) met clinical criteria
 49% (n=82) initiated PrEP = "Uptake"

62% (82/135) of eligible participants had PrEP uptake.

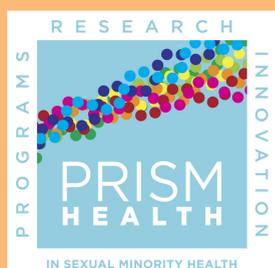
PrEP uptake did not significantly differ by age (p=0.134), race (p=0.360) or city (p=0.076).

PrEP interest, behavioral and clinical eligibility, and uptake overall and by study site among HIV-negative participants, Sibanye Health Project, 2015-2016



Conclusions

Levels of interest and eligibility for PrEP were high among MSM/transwomen in PE and CT. About two thirds of those eligible initiated PrEP. These data illustrate that interest in PrEP is high, behavioral and clinical screening for PrEP is feasible in diverse urban settings, and high PrEP coverage is possible when it is offered as part of a comprehensive package of HIV prevention services.



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