Demand for Pre Exposure Prophylaxis for HIV (PrEP) and the impact on clinical services: Perspectives from Scottish men who have sex with men (MSM)

R Gilson, D Clutterbuck, ZE Cher

1. Introduction

Delays in resolving access to NHS funded PrEP have led to informed patients purchasing PrEP online. It is likely that a proportion of MSM will continue to self-purchase after it becomes available through NHS routes.

2. Objectives

- How many **eligible** (high risk, as defined by PROUD study criteria¹) MSM might access PrEP in Lothian?
- How many **ineligible** (lower risk) MSM would be willing and able to self-fund PrEP?
- How do men see this impacting on other HIV prevention strategies?

3. Methods

Self-completed anonymous questionnaire (paper and online SurveyMonkey) with MSM populations attending mainstream, outreach and third sector clinical services. The survey period was February 2016 to September 2016

4. Results

- Total of 377 questionnaires were returned (34 excluded)
- 25-34 years old largest group (38.4%)
- White British (91.1%), educated to degree level or higher (65.4%), annual income of over £10,000.00 (74.7%)
- 28% diagnosed with an STI in the last 12 months, 18% used HIV PEP, 13.8% participated in Chemsex (previous 3 months), 27.5% participated in group sex (previous 3 months).
- 81.5% had heard of HIV PrEP
- 15.5% would be eligible to receive PrEP (PROUD Study criteria)
- Of eligible, 94.3% had heard of PrEP and 81.1% were very/extremely likely to want it if available and funded by the NHS
- Of ineligible, 80% had heard of PrEP and 37.3% were very/extremely likely to want it if available and funded by the NHS
- 89.5% thought PrEP should be available through the NHS
- 69% thought those assessed by a clinician as being high risk should be offered PrEP, 61.9% that it should be provided to everyone who requested it, 28% thought no one should be refused
- Of eligible, 23% had both an income >£10,000/yr and willing to pay at least £50 per month. Of these 17% of total very/extremely likely to want to use PrEP if it was available to buy
- Of ineligible, 21.5% had both an income >£10,000/yr and were willing to pay at least £50 per month. Of these 8% very/extremely likely to want to use PrEP if it was available to buy
- 47% indicated that they would need to take PrEP between 4 to 10 days per month

5. Discussion

- High levels of awareness of PrEP (81.5%)
- 15.5% eligible for PrEP. Amongst these high levels of understanding, awareness and willingness to take PrEP
- Over 70% of eligible men would be unwilling or unable to self-fund PrEP in the absence of NHS funding
- 37.3% of ineligible felt that they were very/extremely likely to want to use it if available on the NHS. Clear eligibility criteria will need to be fairly applied for equity of access and cost-effectiveness
- 21.5% of ineligible men met the affordability criteria of which 8% very/extremely likely to want to use it and require clinical advice and monitoring
- Clinic time will need to be allocated for discussing eligibility
- Men who thought they may need to take PrEP for between 4 to 10 days a month (47%) might consider EBD which may be helpful in capacity planning
- Most respondents believed risk taking would not increase and use of other HIV prevention strategies would not change (see below)
- Men felt strongly that PrEP would reduce concerns about having sex with a known HIV positive partner

References

- McCormack S, Dunn DT, Desai M *et al.* Pre-exposure prophylaxis to prevent the acquisition of HIV-1 infection (PROUD): effectiveness results from the pilot phase of a pragmatic open-label randomised trial. *Lancet* 2015.

Impact on own sexual behaviour and other HIV prevention strategies

Impact on other's sexual behaviour and other HIV prevention strategies

Acknowledgements

The authors would like to thank all the participants in the study. We would also like to thank all Chalmers Centre staff members (particularly Jack Perry), ROAM staff (particularly James Kivlin) and the team at Waverley Care. Thanks also to Ingrid Young for input with statistics and questionnaires and Jamie Frankis for questions and review.