

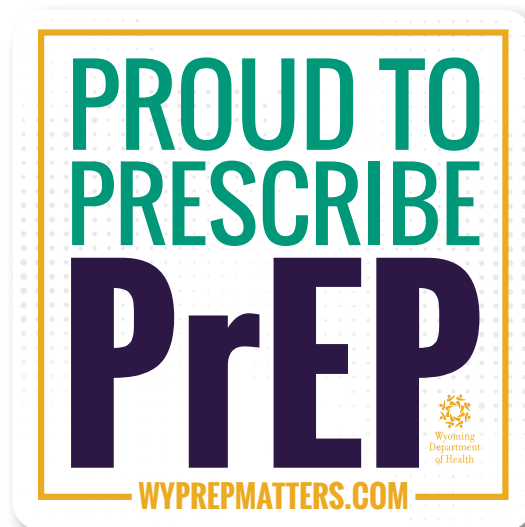
Through 2020, 503 people in Wyoming were diagnosed with HIV, and in our current healthcare crisis, your patients need access to every preventative medication and service available.

PrEP, or Pre-Exposure Prophylaxis, is a daily prescription or injection every 2 months for people who don't have HIV, and are at risk of contracting HIV through sex or injection drug use. The Wyoming Department of Health and AIDS Education and Training Center are here to guide you through the process of learning about PrEP so you can help protect your patients.

Browse these materials, then contact me to request your free WY PrEP Matters window cling so your patients know you're a PrEP-friendly provider. Together, we can make Wyoming a safer, healthier place for everyone.

A handwritten signature in teal ink that reads "Lauren Schiller".

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Concept	Main Points	Possible Starting Dialogue
<b>INTRODUCTION</b>	<ul style="list-style-type: none"> <li>Introduce and define PrEP.</li> <li>Reinforce what the client knows/dispel myths about PrEP.</li> </ul>	<ul style="list-style-type: none"> <li>PrEP is a highly effective (~99%) pill you take once a day to prevent HIV.</li> <li>Tell me what you have heard/know about PrEP.</li> <li>Here are some basic facts about PrEP...</li> </ul>
<b>CHOICES</b>	<ul style="list-style-type: none"> <li>While on PrEP, client may want to consider additional choices for safer sex and injection practices.</li> </ul>	<ul style="list-style-type: none"> <li>PrEP will not protect you from STIs, including HCV, so you may still want to make choices about safer sex/injection practices even if you choose to go on PrEP. These may include... [insert additional safer practices here]</li> <li>You can still get pregnant while on PrEP.</li> </ul>
<b>RISK</b>	<ul style="list-style-type: none"> <li>PrEP is used during on-going HIV risk.</li> <li>Communicate risk with partners and providers.</li> <li>PrEP takes time to reduce risk.</li> </ul>	<ul style="list-style-type: none"> <li>Risks that may make PrEP a good choice include... [insert risks here]</li> <li>Your risks may change and that needs to be discussed with your provider. PrEP is not intended to be taken forever.</li> <li>Communicate with partners if you discontinue PrEP.</li> <li>PrEP takes at least 1 week for men and 3 weeks for women to obtain maximum effectiveness.</li> </ul>
<b>ADHERENCE</b>	<ul style="list-style-type: none"> <li>To be most effective, PrEP should be taken as prescribed.</li> </ul>	<ul style="list-style-type: none"> <li>You must adhere to PrEP routinely/as prescribed for it to be effective.</li> <li>Setting daily reminders to take PrEP on your phone or watch can provide extra support. Text MEDS to 877877 to receive texts that remind you when to take your medication.</li> </ul>
<b>FINANCES</b>	<ul style="list-style-type: none"> <li>Several options are available to assist with the cost of PrEP.</li> </ul>	<ul style="list-style-type: none"> <li>PrEP Navigation Services assist in finding payment options for PrEP. Enrollment in marketplace, employer based private insurance or Medicaid/care will reduce the cost of PrEP, as will drug assistance programs.</li> <li>For assistance with PrEP navigation complete a PrEP Navigation Form at <a href="https://forms.gle/aerYdCLPoU41GsEFA">https://forms.gle/aerYdCLPoU41GsEFA</a></li> </ul>
<b>TESTING</b>	<ul style="list-style-type: none"> <li>There are tests that will need to be performed to begin and stay on PrEP.</li> <li>Report symptoms of Acute HIV to a provider.</li> </ul>	<ul style="list-style-type: none"> <li>You will need hepatitis, STI, kidney function, and HIV tests to begin PrEP and then every three months while on PrEP.</li> <li>Communicate with your provider if you experience signs/symptoms of Acute HIV.</li> </ul>
<b>SIDE EFFECTS</b>	<ul style="list-style-type: none"> <li>Like all medications, PrEP could have side effects for some.</li> </ul>	<ul style="list-style-type: none"> <li>The most common side effects are gastrointestinal, such as stomach upset, cramping, nausea and diarrhea. Only about 1 in 10 people have side effects. They usually last a few weeks.</li> </ul>
<b>CONCLUSION</b>	<ul style="list-style-type: none"> <li>Address questions/assess interest.</li> <li>Offer referrals as appropriate.</li> </ul>	<ul style="list-style-type: none"> <li>What other questions do you have about PrEP? Specific medical concerns need to be addressed by your provider.</li> <li>What are your thoughts at this time? Pro/Con?</li> </ul>

### TAKING A SEXUAL HISTORY:

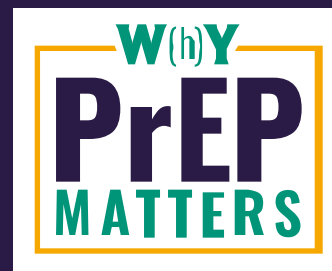
Your patients' sexual history is an important part of their overall health and wellness. Taking a sexual history will help guide the physical exam and screening of all exposed sites for sexually transmitted infections (STI), and will help you establish your patients' STI/HIV risk. **Take a sexual history from all patients. Try starting with something like:** "It is important we discuss your sexual practices. I speak with all of my patients about many different aspects of their lives."

Concept	Main Points	Sample Questions
<b>PARTNERS</b>	Number, gender and HIV status of partners over a given time	<ul style="list-style-type: none"> <li>In the past 12 months, how many sexual partners have you had? What are the genders of your sexual partners?</li> <li>Do you or your current partner have other partners?</li> </ul>
<b>PRACTICES</b>	Types of sexual practices: oral, vaginal or front hole, and anal	<ul style="list-style-type: none"> <li>In the past 12 months, have you had vaginal or front hole sex? Oral sex? Anal sex?</li> <li>For men or transgender women who have sex with men: Are you ever the receptive partner (the bottom)?</li> </ul>
<b>PROTECTION FROM STIS</b>	Use of condoms, other barrier methods, and/or PrEP or PEP	<ul style="list-style-type: none"> <li>How do you keep yourself from getting infected with STIs?</li> <li>Do you use condoms or other barrier methods consistently? If not, in which situations are you more likely to use a condom or other barrier?</li> <li>Have you ever used emergency PEP after a possible exposure to HIV?</li> </ul>
<b>PAST HISTORY OF STIS, INCLUDING HIV</b>	Establish risk of repeat infections, HIV status and hepatitis risk. Diagnoses of gonorrhea and early syphilis are signals of increased HIV risk and should trigger the routine offer of PrEP.	<ul style="list-style-type: none"> <li>Have you ever been diagnosed with an STI, such as herpes, gonorrhea, chlamydia, syphilis, HPV or trichomoniasis? When?</li> <li>Have you had any recurring symptoms or STI diagnoses?</li> <li>Have you ever been emotionally or physically abused by a partner?</li> </ul> <p><b>To assess HIV and hepatitis risk, ask:</b></p> <ul style="list-style-type: none"> <li>When was your last HIV test?</li> <li>Have you or any of your partners been diagnosed with HIV or hepatitis C?</li> <li>Have you or any of your partners injected drugs?</li> </ul>
<b>PREGNANCY</b>	Desire for pregnancy and/or use of prevention methods	<ul style="list-style-type: none"> <li>Are you trying to have a child? Do you want to avoid pregnancy?</li> <li>Are you using contraception or practicing any form of birth control?</li> <li>Do you need any information or a referral for birth control or fertility services?</li> </ul>

### BEST PRACTICES FOR OBTAINING A SEXUAL HISTORY:

- Ensure a safe patient environment
- Be nonjudgmental
- Be sensitive and matter-of-fact
- Assure confidentiality
- Avoid assumptions
- Take a sexual history from all patients

# PROVIDERS CAN HELP PREVENT HIV IN WYOMING BY PRESCRIBING PrEP.



## WHAT IS PrEP?

- PrEP is a daily prescription pill or injection every 2 months for people who are HIV-negative and at risk of getting HIV through sex or injection drug use.
- PrEP is safe. Few adverse effects have been observed.
- PrEP is FDA-approved as the fixed-dose antiretroviral medications Truvada® and Descovy®.
- PrEP injection, cabotegravir (CAB), was FDA approved in 2021.

**PrEP reduces the risk of getting HIV from sex by about 99%<sup>1</sup> when taken as prescribed.**

## WHO IS PrEP MEANT FOR?

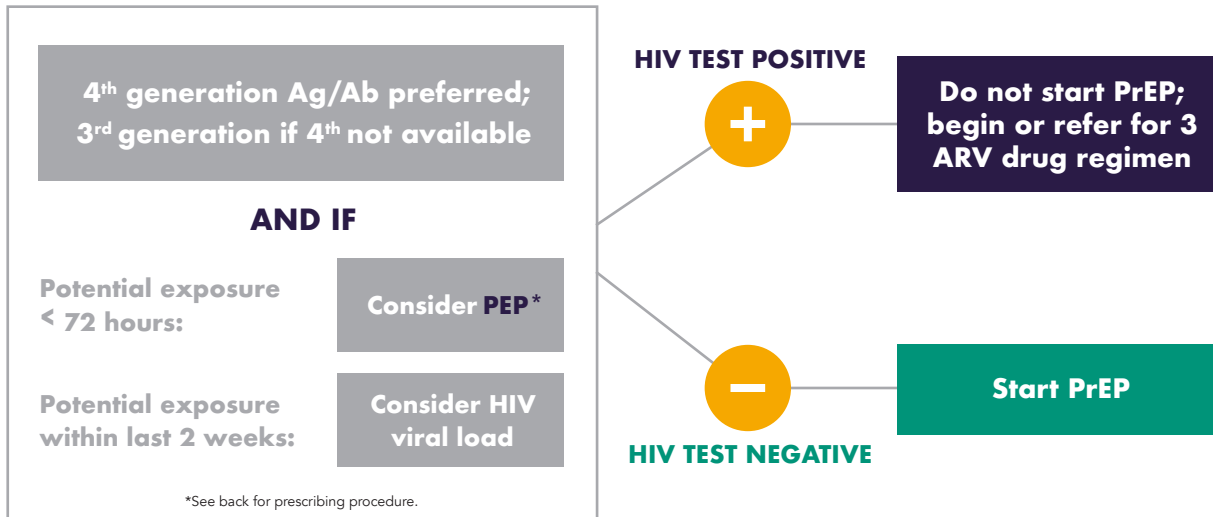
- Anyone who has had anal or vaginal sex in the past 6 months AND any of the following:
  - Anyone who has sex with someone who is HIV+ or whose status is unknown
  - Anyone who has anal or vaginal sex without a condom
  - Anyone who has or had a bacterial STI within the past 6 months
- Anyone who has an injection drug partner with HIV or has shared needles
- Anyone who requests PrEP

## KEY MESSAGES

- All sexually active adults and adolescents should be informed about PrEP for HIV prevention.
- Take a thorough sexual history once a year on all patients.
- Test for STIs, including extra-genital testing, based on patient risk as indicated on the current Wyoming Communicable Disease Unit (CDU) Screening Recommendations. Recommendations available at <https://health.wyo.gov/publichealth/communicable-disease-unit/hiv-prevention-program/>
- Talk about PrEP as one method for preventing HIV.
- Test for HIV. Only begin PrEP after confirming patient is HIV negative.
- Follow up with patients on PrEP every 3 months for HIV/STI testing and PrEP prescription refill.

# TESTING FOR HIV AND PRESCRIBING PrEP

## HIV TEST:



## SEXUAL HISTORY

- Partners: Do you have sex with men, women or both?
- Practices: In the past year, what type(s) of sex have you had: vaginal, oral, anal receptive, anal insertive?
- Protection from STIs: What methods do you use to prevent STIs (STDs)? If you use condoms, how often?
- Past history of STIs: Have you ever had an STI?
- Pregnancy: Are you trying to conceive or father a child? Are you trying to avoid pregnancy?
- PrEP: Do you think a daily pill or bi-monthly injection for HIV prevention would improve your sexual health?

## BASELINE ASSESSMENT (FOR ORAL PrEP)

(PrEP PRESCRIBED WITHIN 7 DAYS OF DOCUMENTED NEGATIVE HIV TEST)

- ☐ Screen for symptoms of acute HIV (fever, fatigue, myalgia/arthritis, rash, headache, pharyngitis, cervical adenopathy, night sweats, diarrhea)
- ☐ HIV test: 4th generation Ag/Ab preferred; 3rd generation if 4th not available (plus HIV viral load if concern for acute HIV)
- ☐ STI screening: gonorrhea & chlamydia (urine or vagina, rectum, pharynx), syphilis screen. Rectal swabs can be self-collected.
- ☐ Serum Creatinine (Creatinine clearance (eCrCl)  $\geq 60$  ml/min for Truvada or  $< 60$  ml/min but  $\geq 30$  ml/min for Descovy) - remeasure after 3 months of initiating PrEP.
- ☐ Hepatitis B Surface Antigen (HBsAg)\*
- ☐ Hepatitis C Antibody (MSM, TGW & PWID)\*
- ☐ Review medication interactions
- ☐ Lipid panel – triglyceride and cholesterol (for Descovy)
- ☐ Pregnancy test\* \*Not a contraindication, but follow-up indicated if positive

## FOLLOW-UP ASSESSMENT EVERY 3 MONTHS

- ☐ Screen for symptoms of acute HIV
- ☐ HIV test
- ☐ Bacterial STI screening for MSM and transgender women who have sex with men (oral, rectal, urine, blood) or those with signs or symptoms of infection

## OTHER

- ☐ Serum Creatinine for patients  $\geq 50$  years old or who have eCrCl  $< 90$  ml/min at PrEP initiation, every 6 months. All other patients, every 12 months.
- ☐ Bacterial STI screening for all sexually active patients, every 6 months
- ☐ Hepatitis C Antibody, every 12 months
- ☐ Lipid panel - triglyceride and cholesterol (for Descovy), every 12 months
- ☐ Pregnancy test, as appropriate

# PRESCRIBING PrEP

**TRUVADA®**  
**or generic equivalent 200/300mg**  
(emtricitabine 200mg/tenofovir disoproxil fumarate 300mg)

**1 tablet PO daily, 30-day supply with 2 refills (after negative HIV test)**

**ICD-10: Z20.6** Contact with and (suspected) exposure to human immunodeficiency virus

OR

**DESCOVY®\* 200/25mg**  
(emtricitabine 200mg/tenofovir alafenamide 25mg)

**1 tablet PO daily, 30-day supply with 2 refills (after negative HIV test)**

**ICD-10: Z20.6** Contact with and (suspected) exposure to human immunodeficiency virus

OR

**INJECTABLE CABOTEGRAVIR 600 MG/3 mL**

**Initial dose, second dose 4 weeks after first dose, every 8 weeks thereafter (after negative HIV test)**

**ICD-10: Z20.6** Contact with and (suspected) exposure to human immunodeficiency virus

\*TAF/FTC (Descovy®) not to be used as PrEP by those at risk from receptive vaginal sex (e.g., cisgender women and some transgender people)

## PATIENT COUNSELING

- Imperfect yet regular adherence can provide significant protection for men who have sex with men, however, **daily dosing** is recommended. Intermittent dosing is not currently recommended.<sup>3</sup>
- PrEP reaches maximum protection **in blood** after approximately 7 days of daily oral dosing, **in rectal tissue** at approximately 7 days and **in cervicovaginal tissues** at approximately 20 days.
- **Combining prevention strategies**, such as condoms plus PrEP, provides the greatest protection from HIV and other STIs. Reinforce the need for HIV and STI testing **every 3 months** for optimal sexual health.
- Identify and address barriers to **medication adherence**.

## SIDE EFFECTS AND POTENTIAL RISKS<sup>2</sup>

- PrEP is generally well-tolerated. About 10% of patients experience **nausea and fatigue** in the 1<sup>st</sup> month of treatment. This typically resolves after 3–4 weeks.
- Decline in **renal function**: consider more frequent monitoring in patients with risk factors for kidney disease.
- Decrease in **bone mineral density**: caution in those with osteoporosis or history of pathologic fracture. Consider baseline DXA for patients with history of or at risk for osteoporosis.

## WHAT IF MY PATIENT HAS A POSITIVE HIV TEST ON PrEP?

- Discontinue PrEP immediately to avoid potential development of HIV drug resistance.
- Determine the last time PrEP was taken and recent pattern of taking PrEP.
- Ensure establishment with HIV primary care for prompt initiation of a fully active ARV treatment regimen and counseling/support services.
- Report new HIV diagnosis to the Wyoming Department of Health electronically or on the Printable Communicable Disease Report Form at <https://health.wyo.gov/publichealth/communicable-disease-unit/di/>

## PrEP IS AFFORDABLE IN WYOMING

For assistance with PrEP navigation, complete a PrEP Navigation Form at <https://forms.gle/aerYdCLPoU41GsEFA>.

### Additional assistance is available through:

- Gilead medication and copay assistance programs: 855-330-5479, [gileadadvancingaccess.com](http://gileadadvancingaccess.com)
- Patient Advocate Foundation (<400% FPL), [copays.org](http://copays.org)
- PAN Foundation (<500% FPL), [panfoundation.org](http://panfoundation.org)

## PRESCRIBING POST-EXPOSURE PROPHYLAXIS (PEP)<sup>4</sup>

Three antiretroviral drugs are recommended for PEP regimen:

**Tenofovir DF (300mg)/Emtricitabine (200mg) daily + Raltegravir 400mg BID**

OR

**Tenofovir DF (300mg)/Emtricitabine (200mg) daily + Dolutegravir 50mg daily**

- Potential HIV exposure within past 72 hours and patient has not taken PrEP for past 7 days
- Provide 28-day supply of PEP, and then transition to only PrEP after documenting HIV-negative status

## RESOURCES

For Wyoming specific resources regarding HIV, visit [WYPrEPMatters.com](http://WYPrEPMatters.com) or call 307-235-9340 for the WyAETC Coordinator

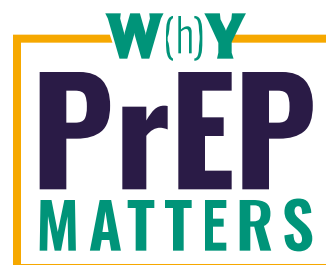
For questions and clinician-to-clinician advice, contact experts at the National Clinician Consultation Center at 855-448-7737 or [nccc.ucsf.edu](http://nccc.ucsf.edu) for HIV, PrEP and PEP questions.

CDC PrEP Guidelines: <https://www.cdc.gov/hiv/clinicians/prevention/prep.html>

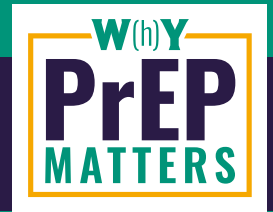
CDC PEP Guidelines: <https://www.cdc.gov/hiv/clinicians/prevention/pep.html>

### REFERENCES

1. "PrEP Effectiveness." Centers for Disease Control and Prevention, 12 May 2021, [www.cdc.gov/hiv/basics/prep/prep-effectiveness.html](http://www.cdc.gov/hiv/basics/prep/prep-effectiveness.html). 2. Grant, Robert M, et al. "Preexposure Chemoprophylaxis for HIV Prevention in Men Who Have Sex with Men." *New England Journal of Medicine*, vol. 363, no. 27, 2010, pp. 2587–99, doi:10.1056/NEJMoa1011205. 3. Anderson, Peter L, et al. "Emtricitabine-Tenofovir Concentrations and Pre-Exposure Prophylaxis Efficacy in Men Who Have Sex with Men." *Science Translational Medicine*, vol. 4, no. 151, 2012, p. 151, doi:10.1126/scitranslmed.3004006. 4. Smith, Dawn K et al. "Antiretroviral Postexposure Prophylaxis After Sexual, Injection-Drug Use, or Other Nonoccupational Exposure to HIV in the United States: Recommendations from the U.S. Department of Health and Human Services." *MMWR. Recommendations and Reports: Morbidity and Mortality Weekly Report. Recommendations and Reports* vol. 54, RR-2 (2005): 1-20.



# PrEP BASICS



PrEP is safe and can reduce your risk of HIV by more than 99%.



It takes at least 1 week on PrEP before you'll be protected for anal sex, and 3 weeks for vaginal sex.



Take 1 pill once a day. Finding a routine is essential.



Get tested for HIV and STIs every 3 months.



Tell your provider if you plan to stop (or restart) PrEP.



## TAKING THE PILL

### One pill per day

PrEP (pre-exposure prophylaxis) is most effective if taken daily. PrEP can be taken even if drinking alcohol or using recreational drugs.

### Getting into a routine

- Take a pill at the same time each day.
- Take a pill with you if you will be out late.
- Set a daily alarm.

### Missed a dose?

- Just take it when you remember. Take the missed pill anytime in the same day, but don't take 2 pills at once.

### Possible side effects

- Some people have gas, nausea, or headache. These symptoms go away within the 1<sup>st</sup> month.
- PrEP may cause small changes in kidney function and bone mineral density, which most often return to normal once PrEP is stopped.

## STAY HEALTHY

- PrEP is highly effective but doesn't protect against other STIs. Condoms provide additional protection against HIV and prevent STIs.
- Protect yourself from other diseases: get vaccinated for Hepatitis A and B and meningitis.



## YOUR PRESCRIPTION

### Filling your prescription

- If you are given a paper prescription, you will need to take it to a pharmacy to get your medication.
- Refills are not always automatic. Contact your pharmacy when you have 5 pills left so you don't run out.
- Before traveling, let your healthcare provider and/or pharmacy know that you may need an extra refill if you are low on medication.

### Cost

- If you are having trouble paying for PrEP, there are assistance programs that may help cover the cost.
- For help, with PrEP navigation complete a PrEP Navigation Form at <https://forms.gle/aerYdCLPoU41GsEFA>.



## STAYING PROTECTED

### Lab testing

- Before starting PrEP, you will get tests for HIV, STIs, kidney function, and Hepatitis B and C.
- You will also get tested for HIV and STIs every 3 months and a kidney function test every 6 or 12 months.

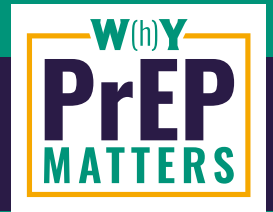
### Stopping PrEP

- If you want to stop PrEP, talk to a healthcare provider about using other HIV prevention strategies. If you have condomless sex while not taking PrEP, call your provider within 72 hours for post-exposure prophylaxis (PEP).

### Restarting PrEP

- If you've stopped PrEP for more than 7 days, it is important to get an HIV test before you restart.
- Report any flu-like symptoms, rashes, or other symptoms to healthcare provider, as these may be symptoms of HIV.

# LO ESENCIAL DE PrEP



PrEP es seguro y puede reducir el riesgo de contagio de VIH en más de 99%.



La pastilla PrEP debe ser tomada por al menos 1 semana para protegerte del VIH durante sexo anal, y 3 semanas para protección durante sexo vaginal.



Toma 1 pastilla diaria. Es importante mantener esa rutina.



Hazte la prueba de VIH y otras enfermedades de transmisión sexual cada 3 meses.



Habla con tu doctor si planeas dejar de tomar PrEP o si deseas reiniciar.



## CÓMO TOMAR PrEP

### Una pastilla al día

- PrEP (Profilaxis para pre-exposición) es más efectivo si es tomado a diario. La pastilla puede ser tomada aun si hay consumo de drogas o alcohol.

### Establece una rutina

- Toma 1 pastilla diaria a la misma hora.
- Si sales de casa lleva pastillas contigo.
- Pon una alarma diaria.

### ¿Se te olvidó tomar una pastilla?

- Toma la pastilla el mismo día a la hora que te acuerdes, pero nunca tomes 2 pastillas a la vez.

### Posibles efectos secundarios

- Algunas personas podrían presentar efectos secundarios tales como gastritis, náusea o dolor de cabeza pero por lo general desaparecen durante el primer mes.
- PrEP puede causar cambios pequeños en la función renal y la densidad mineral del hueso, aunque estos cambios a menudo vuelven a la normalidad una vez que hayas dejado de tomar PrEP.



## SURTIENDO LA RECETA

### Cómo surtir tu receta

- Si se te da una receta en papel, tendrás que llevarla a una farmacia para obtener el medicamento.
- La receta no siempre es surtida automáticamente. Ponte en contacto con tu farmacia cuando te queden alrededor de 5 pastillas y obtén tu siguiente receta antes de que se te acabe el medicamento.
- Antes de salir de viaje, pídele a tu doctor o farmacéutico una prescripción extra si en el momento tienes poco medicamento.

### Costo

- Si necesitas ayuda para cubrir el costo de PrEP, hay programas de asistencia que pueden ayudarte.
- Para obtener ayuda con la navegación de PrEP, complete un Formulario de navegación de PrEP en <https://forms.gle/aerYdCLPoU41GsEFA>.



## MANTENTE PROTEGIDO

### Pruebas

- Antes de empezar a tomar PrEP, se requiere hacerse pruebas de VIH, enfermedades de transmisión sexual, función renal y hepatitis B y C.
- También se requiere pruebas de VIH y de enfermedades de transmisión sexual cada 3 meses, y de la función renal cada 6 o 12 meses.

### Cómo dejar de tomar PrEP

- Si deseas dejar de tomar PrEP, habla con tu doctor sobre cómo utilizar otros métodos de prevención contra el VIH. Si tienes relaciones sexuales sin condón mientras no estás tomando PrEP, llama a tu doctor para hablar de PEP (profilaxis pos-exposición PEP, por sus siglas en inglés).

### Cómo reiniciar PrEP

- Si has dejado de tomar PrEP por más de 7 días, es importante hacerse la prueba de VIH antes de reiniciarlo.
- Hable con su médico si tiene síntomas de gripe, erupciones u otros síntomas, ya que pueden ser síntomas del HIV.

## MANTENTE SALUDABLE

- PrEP es altamente efectivo pero no te protege contra otras enfermedades de transmisión sexual. Los condones brindan protección adicional y te protegen contra otras enfermedades de transmisión sexual.
- Protégete de otras enfermedades: vacúnate contra la hepatitis A y B, así como contra la meningitis.