More Infectious Disease Docs Are Prescribing PrEP

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The proportion of infectious disease (ID) physicians who report prescribing Truvada (tenofovir/emtricitabine) as pre-exposure prophylaxis (PrEP) apparently grew substantially between 2013 and 2014, aidsmap reports. Meanwhile, most ID physicians recommend HIV-positive patients start antiretroviral (ARV) treatment soon after diagnosis, regardless of CD4 count.

Publishing their findings in Clinical Infectious Diseases, researchers conducted a survey of clinician members of the Infectious Disease Society of America's Emerging Infections Network. A total of 573 physicians responded to the May 2014 survey, for a 48 percent response rate. Out of this group, 415 clinicians (72 percent) were HIV specialists.

Thirty-two percent of the respondents reported ever prescribing PrEP. This is a considerable increase compared with a June 2013 survey of the physician network, in which just 9 percent said they had ever prescribed Truvada as a prevention method to HIV-negative patients.

In the 2014 survey, 80 percent of the respondents said they would recommend PrEP to the HIV-negative partner of a patient living with HIV who had a detectable viral load, given that the couple inconsistently used condoms together. Thirty-three percent of the clinicians said they endorsed PrEP for the HIV-negative partner if the partner with HIV had an undetectable viral load.

Eighty-seven percent of the respondents said they typically recommend HIV-positive patients start ARVs soon after diagnosis. Eleven percent said they waited until a patient's CD4s were below 500, and 2 percent waited until CD4s dropped below 350.

Eighty percent of the clinicians said they offered sterile needles to HIV-negative injection drug user (IDU) patients. Sixty-eight percent said they routinely offered opioid substitution therapy. Forty-two percent believed that PrEP should be routinely offered to IDUs with HIV. Twenty-four percent said they felt adequately prepared to prescribe PrEP to this population.

To read the aidsmap article, click here.

To read the study abstract, click here.

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