

Poll of HIV Providers Finds Some Reluctance Toward PrEP Prescribing

April 15, 2015

A national survey of HIV specialists has found evidence of less than full-fledged enthusiasm with regards to prescribing Truvada (tenofovir/emtricitabine) as pre-exposure prophylaxis (PrEP), depending on the patient group. Publishing their findings in *HIV Specialist*, the magazine of the American Academy of HIV Medicine, researchers gave a 53-question survey to 324 AAHM members about their attitudes toward prescribing PrEP to HIV-negative patients.

The clinicians were asked, based on particular demographics of patients, whether they were “not at all likely,” “somewhat likely” or “very likely” to prescribe PrEP to them within the next year. The survey found no statistically significant differences in the responses when comparing regions of the country.

Broken down by patient groups, the proportions of the physicians who said they were “very likely” to prescribe PrEP were as follows: 79 percent for men who have sex with men (MSM) with an HIV-positive partner; 66 percent for MSM with a partner at risk for contracting HIV; 63 percent for MSM who sometimes use condoms; 61 percent for MSM with partners of unknown HIV status; 49 percent for injection drug users; 48 percent for MSM with an HIV-positive partner taking antiretroviral therapy; 47 percent for heterosexuals with HIV risk factors; 44 percent for crystal meth users; 44 percent for MSM regardless of risk for HIV; and 30 percent for MSM who always use condoms.

Reasons for reluctance to prescribe PrEP including concerns about: whether patients would adhere to the daily pill; if patients would reliably return for routine follow-up, testing and counseling; the effectiveness of PrEP; side effects; whether patients would engage in greater sexual risks as a consequence of starting PrEP, a phenomenon known as risk compensation; and the cost.

To read a press release regarding the study, [click here](#).

To read the survey results, [click here](#). (See Page 19.)
