Prevention: PrEP Disparities

Disparities across states in pre-exposure prophylaxis (PrEP) use appear to have worsened over time.

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Disparities across states in pre-exposure prophylaxis (PrEP) use appear to have worsened over time, according to a recent study. Truvada (tenofovir disoproxil fumarate/emtricitabine) was first approved for HIV prevention in 2012, but states did not embrace it at the same pace. Some, including Massachusetts, New York and Connecticut, were early adopters, while others took a wait-and-see approach. Researchers used PrEP prescription data from AIDSVu.org and estimates from the Centers for Disease Control and Prevention of the number of people who could benefit from PrEP. The states with the lowest uptake in 2014—Wyoming, Montana, Alaska, Indiana and Idaho—started an average of 3% behind early adopters, and that disadvantage grew as they tried to catch up. Between 2014 and 2018, PrEP use rose by 17% in the Northeast, 9% in the Midwest and 7% in both the South and the West. By 2018, PrEP use in New York—the number one state—had increased by nearly 30%, but the number edged higher by only 2% in Wyoming.

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