



# Targeting PrEP to High-Risk Gay Men Is Cost-Effective

A Dutch mathematical model also found that PrEP would save money overall with generic pricing.

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Providing Truvada (tenofovir/emtricitabine) as pre-exposure prophylaxis (PrEP) to men who have sex with men (MSM) at high risk of HIV is cost-effective, aidsmap reports. A Dutch mathematical modeling study has also found that if Truvada was sold at generic prices, PrEP would actually save money overall.

Publishing their findings in *The Lancet*, researchers created a mathematical model to estimate the financial impact of providing PrEP to 10 percent of Dutch MSM who have five or more sexual partners per year.

The model assumed that PrEP was cost-effective if, factoring in the savings of averted HIV cases, the HIV prevention method's use costs less than 20,000 euros (about \$22,000) per quality-adjusted life year (QALY) gained. It also assumed that among all men taking PrEP, Truvada would reduce their risk of HIV by 80 percent.

A QALY is one year lived in perfect health. A year in less than perfect health amounts to less than one QALY, proportional to the drop in health. So those with compromised health need to live for more than one additional year to experience a full QALY.

The savings were calculated over a 40-year period, assuming that 4,500 men are taking PrEP in any given year and that the average man would stay on PrEP for five years.

The model found that if PrEP is taken daily, its use in this population yields a cost of 11,000 euros for each additional QALY, meaning it is cost-effective in this scenario. If individuals follow an on-demand protocol, taking the drug only around the days of sexual encounters and ultimately taking half as much as those taking it daily, the cost for an additional QALY would be just 2,000 euros.

If the cost of PrEP dropped 70 percent or more, daily PrEP among this population would save money. If the cost dropped 30 to 40 percent, on-demand PrEP would save money.

To read the aidsmap article, [click here](#).

To read the study abstract, [click here](#).

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