

PrEP Cheat Sheet



PrEP = Pre-Exposure Prophylaxis

HIV negative individuals exposed to HIV have a greatly reduced risk for acquiring HIV if they take PrEP
The only FDA-approved drug for PrEP for HIV is tenofovir disoproxil fumarate/ emtricitabine (TDF/FTC, Truvada®)
Caution: do not confuse PrEP with PEP (Post-Exposure Prophylaxis) or OPEP (occupational PEP)

Who Qualifies for PrEP?

HIV negative individuals at substantial risk for HIV infection
-Consider sexual practices
-Consider HIV status of sexual partner(s)
-Consider intravenous drug abuse

Truvada® Dosing For PrEP

1 pill once daily continuously
Emtricitabine 200mg/ TDF 300mg per tablet
Administer with or without food
Not recommended for CrCl below 60 mL/min

CDC's Recommended Monitoring for PrEP

	Baseline	At Least Every 3 Months	At Least Every 6 Months
BMP to assess renal function	X	At 3 months, then at least every 6 months	
HIV test	X	X	
STD symptom assessment	X	X	
Medication adherence counseling	X	X	
Behavioral risk reduction support	X	X	
Side effect assessment	X	X	
Bacterial STD testing	X		X

*Consider oral + rectal STD testing, consider discussing pregnancy plans if female, for IVDU discuss clean needle access

Key PrEP Counseling Points

- ✓ PrEP is not 100% effective, but to be most effective it should be taken daily
- ✓ PrEP does not protect against other STDs
- ✓ Consistent and correct condom use during PrEP is important
- ✓ Use lubricants to avoid tearing condoms, if necessary
- ✓ PrEP is not a license to have unprotected sex
- ✓ Encourage HIV testing of partners
- ✓ Encourage to select less risky sexual behaviors, such as oral sex
- ✓ For IV drug users, discuss clean needles and treatment programs
- ✓ PrEP may not be necessary if a risk of HIV infection is no longer present
- ✓ Follow-up with your provider every 90 days for screening and counseling

Truvada® Adverse Effect Highlights

- Lactic acidosis/ hepatomegaly
- Decreased bone mineral density
- Osteomalacia
- Renal toxicity
- Headache
- Abdominal pain
- Immune reconstitution syndrome
→ in the setting of HIV infection

Truvada® for PrEP FDA Boxed Warning

Must only be prescribed to patients confirmed as HIV-negative immediately prior to initiating therapy and periodic testing (every 3 months) on therapy is indicated. Drug-resistant HIV-1 variants have been identified with use of Truvada® for PrEP following undetected acute HIV-1 infection. Do not initiate if signs or symptoms of acute HIV-1 infection are present unless HIV-negative status is confirmed.

OTHER IMPORTANT NOTES

- TDF/FTC was FDA-approved for PrEP in 2014 after studies found HIV risk was up to 92% lower with PrEP
- A history of multiple STDs in an HIV-negative patient should trigger consideration to initiate PrEP
- Generally discourage access to more than a 90 day supply to ensure adherence to every 90 day screening
- The cost of TDF/FTC can be substantial and become a barrier to therapy
- Tenofovir alafenamide/ emtricitabine (TAF/FTC, Descovy®) is not FDA-approved for PrEP
 - TAF/FTC approval for PrEP is anticipated and TAF has less renal effects than TDF
- PrEP on demand (also known as event-driven pericoital PrEP) has been studied and shows promise, which could reduce costs and remove the need to take TDF/FTC continuously day after day for PrEP
- For the most up to date information, visit www.CDC.gov/hiv/risk/prep

Abbreviations: HBV = hepatitis B virus, HIV = human immunodeficiency virus, oPEP = occupational post-exposure prophylaxis, PEP = post-exposure prophylaxis, PrEP = post-exposure prophylaxis, STD = sexually transmitted disease