

HIV Pre-exposure Prophylaxis (PrEP): Knowledge and Attitudes among a New York City Emergency Department Patient Population

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Background

- HIV Pre-exposure Prophylaxis (PrEP)—has recently been shown to be effective at reducing HIV acquisition
- Outstanding questions:
 - how to engage at-risk individuals who might be eligible for PrEP
 - Whether PrEP will be acceptable to those who would be eligible
 - What will happen with risk-behaviors for individuals who initiate PrEP
- Urban emergency department one venue to gauge attitudes and acceptability toward PrEP among at-risk individuals who have limited access to preventive health

Study

- Objective:
 - Determine knowledge and acceptability of PrEP among urban ED patient population with high HIV prevalence (3.3% - blinded seroprevalence survey)
- Design:
 - Prospective study on a convenience sample of ED patients (aged 18+) at an NYC hospital between July and August 2011
 - Anonymous written surveys assessed knowledge of and attitudes towards PrEP

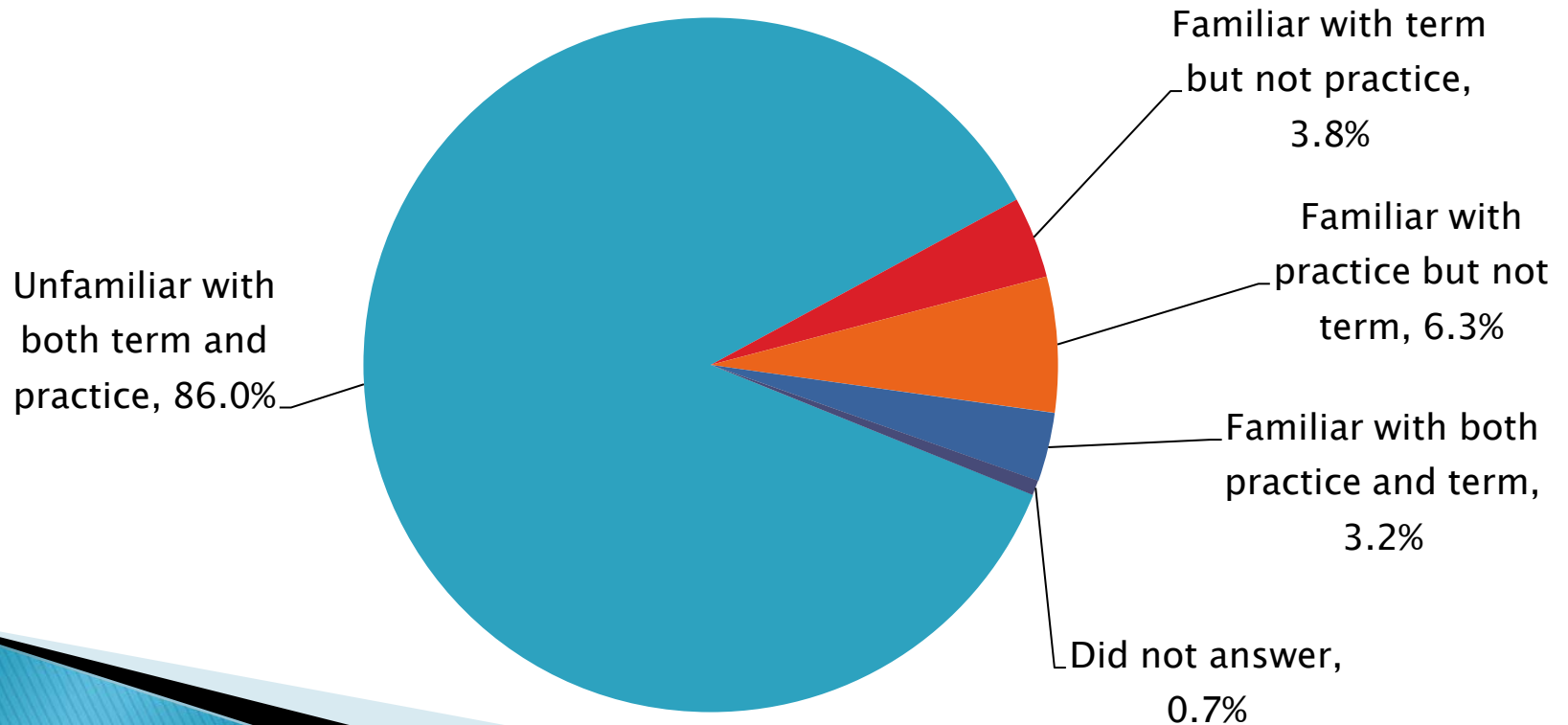
Results: Demographics (n=474)

Age	35 ± 13.1 years
Female	59.1% (279)
Latino	40.7% (193)
Non-Hispanic Black	38.2% (181)
Condom use in past 3 months:	
Never or almost never	39.3% (186)
Sometimes or almost every time	27.1% (128)
Every time	16.3% (77)
Not applicable	17.3 (82)
Prior HIV test	78.% (370)
Self-perceived HIV risk level	
High risk	3.7% (17)
Low risk	32.6% (151)
No risk	60.5% (280)
Prefer not to answer	3.2% (15)

Results: Knowledge

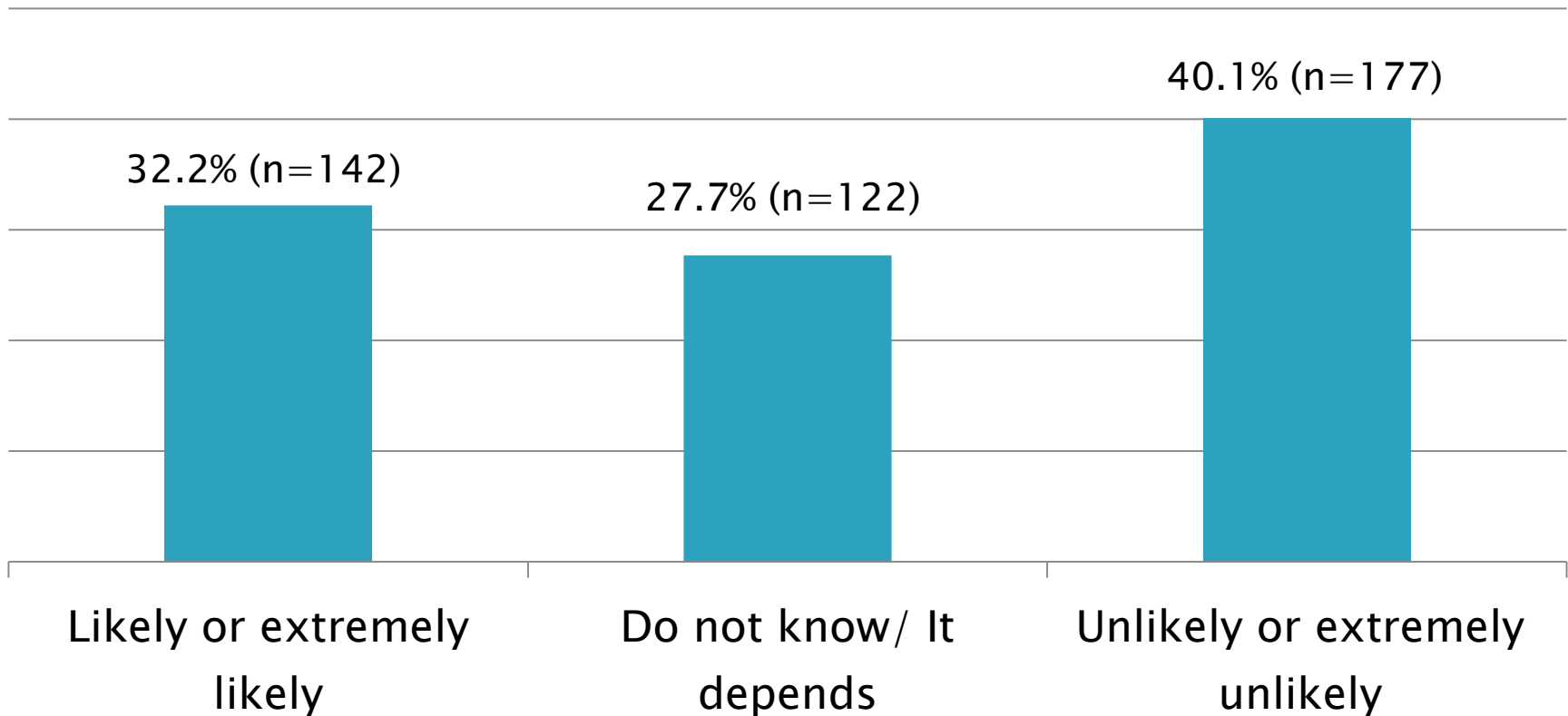
Knowledge of **Term** "PrEP": Have you ever heard of PrEP or Pre-Exposure Prophylaxis? (n=474)

Knowledge of PrEP **Practice**: Have you ever heard of HIV-negative individuals using HIV medication BEFORE having sex to reduce their chance of getting HIV? (n=474)



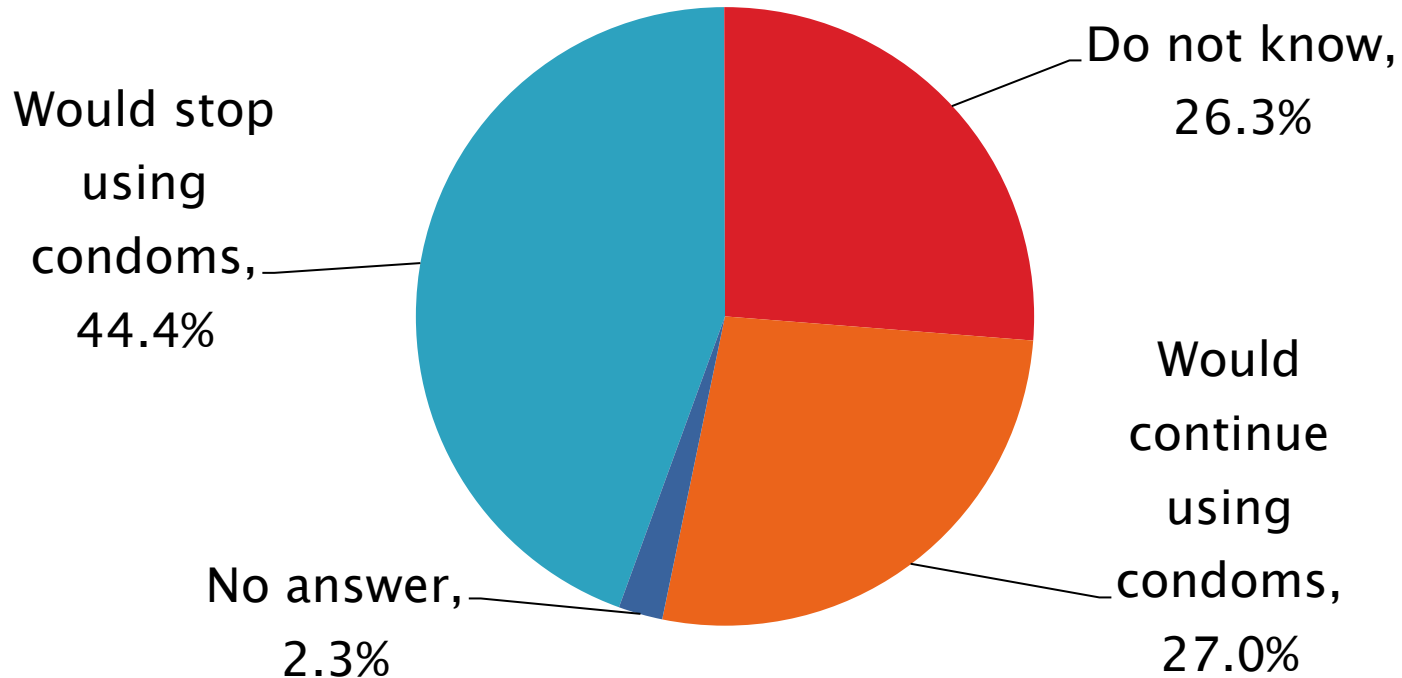
Results: Acceptability

How likely are you to use PrEP if it becomes easily available?



Results: Attitudes

If people start using PrEP, do you think they would continue using condoms or stop using them? (n=471)



Conclusions:

- Majority of patients who might be eligible for PrEP have never heard of it
 - Implementation of PrEP must be accompanied by expanded education
 - Need to enforce PrEPs limitations, side-effects and need to adhere to other prevention methods
 - Behavioral disinhibition could imperil the success of this HIV prevention strategy (e.g. decreased condom use)
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