

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

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Background

- The Centers for Disease Control and Prevention (CDC) estimates that 1.1 million persons are living with HIV in the United States, with approximately 56,000 new infections occurring each year.
- HIV Pre-exposure Prophylaxis (PrEP)—has recently been shown to be effective at reducing HIV acquisition in clinical trials.
- Despite interim CDC guidance on the use of PrEP, questions remain as to the exact methods by which PrEP will be implemented and eligibility for the treatment will be determined.
- Because the long-term effectiveness of PrEP in reducing HIV incidence rates could depend largely on acceptability and medication adherence, familiarity with patients' knowledge and attitudes towards PrEP can help guide and inform future implementation strategies.
- An urban emergency department is an ideal venue at which to engage at-risk individuals who might otherwise have limited access to preventive healthcare.

Objective

Determine the knowledge and acceptability of PrEP among an urban emergency department patient population.

Methods

Study Design: A prospective study was conducted on a convenience sample of ED patients at an NYC hospital from July to August 2011. Eligible participants completed anonymous written surveys about their knowledge of and attitudes towards HIV Pre-exposure Prophylaxis.

Study Population and Setting: The Adult ED of the Jacobi Medical Center, a 500 bed public teaching hospital serving a primarily medically indigent minority population.

Inclusion Criteria: English- or Spanish-speaking, medically stable, aged 18+ years, and able to understand the consent process.

Exclusion Criteria: Clinically unstable or medically unfit to participate (as deemed by their ED provider), unwilling to participate, or are unable to understand the consent process.

Results

Table 1: Participant Demographics (n=474)

Age	35.3 ± 13.1 yrs
Female	59.1% (279)
Latino	40.7% (193)
Non-Hispanic Black	38.2% (181)
Education level	
Less than high school	6.3% (30)
Acquired GED	7.8% (37)
Some high school	15.4% (73)
Some college/associate's	28.7% (136)
College graduate	13.7% (65)
Postgraduate degree	2.3% (11)
Currently in serious relationship	59.2% (122)
Condom use in past 3 months	
Never	35.9% (170)
Almost never	3.4% (16)
Sometimes	14.4% (68)
Almost every time	12.7% (60)
Every time	16.3% (77)
Not applicable	17.3% (82)
Prior HIV test	78.1% (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)

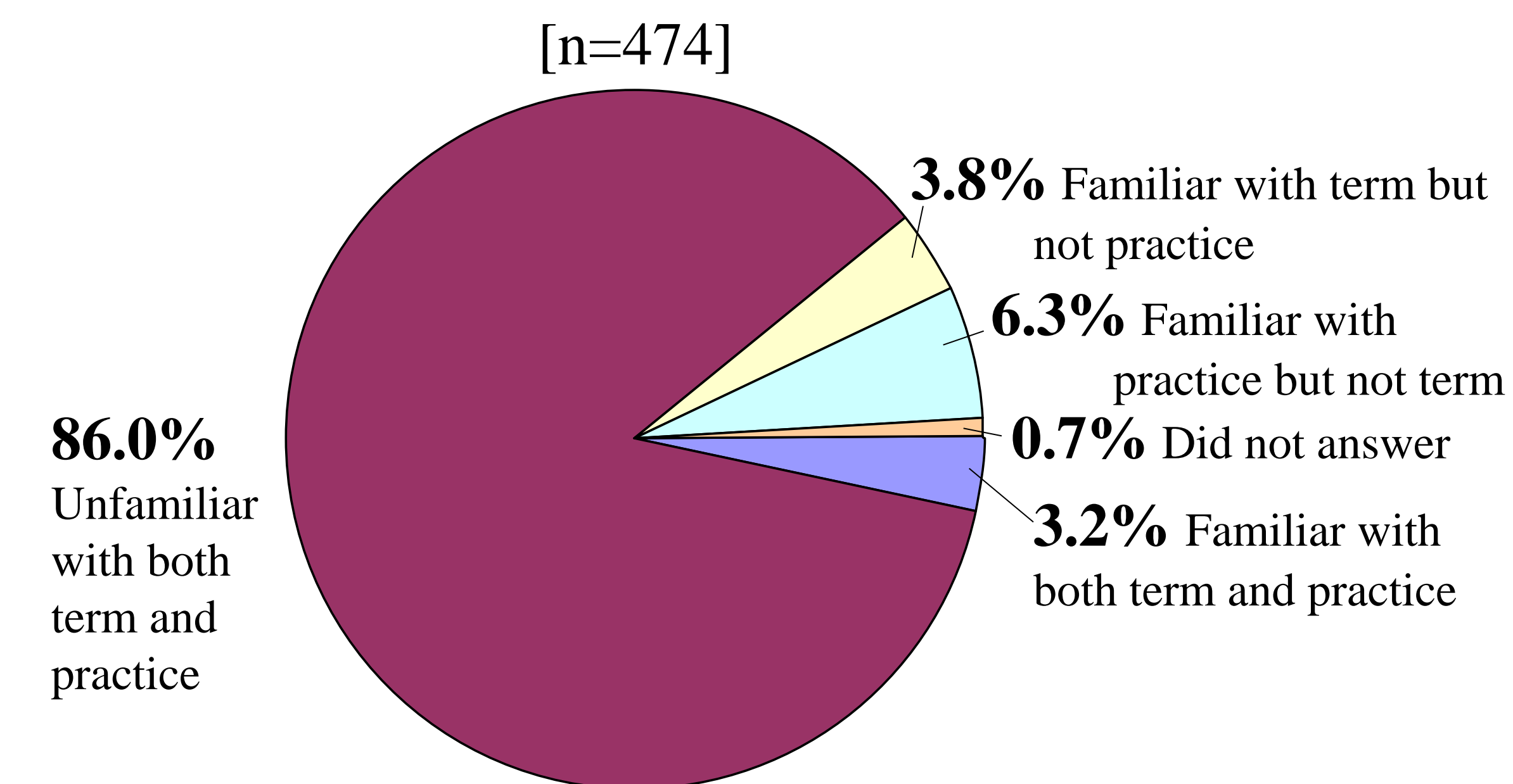
Results

Knowledge of Term "PrEP"

Have you ever heard of PrEP or Pre-Exposure Prophylaxis?

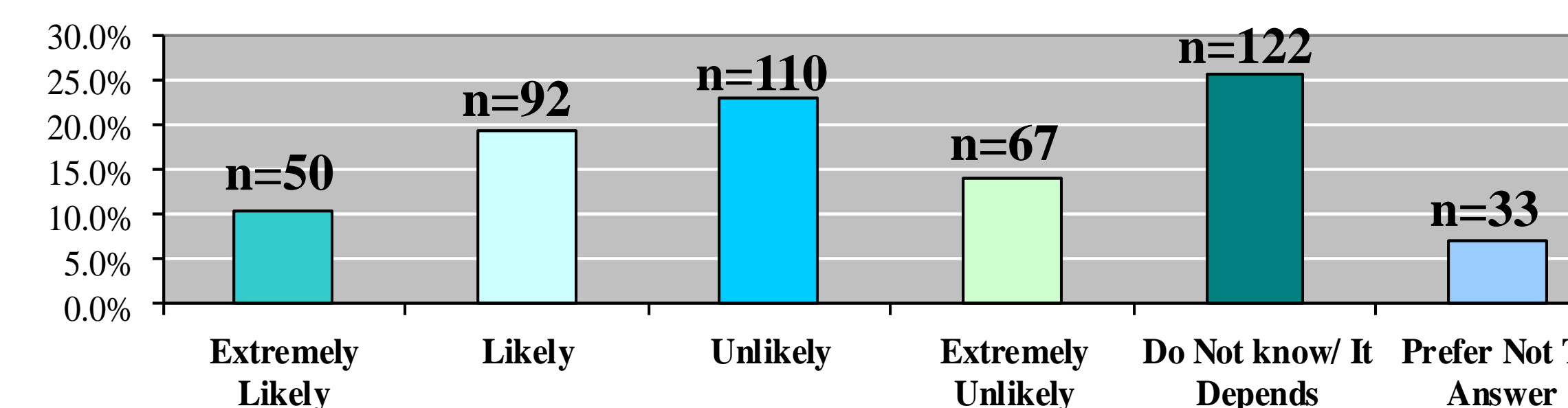
Knowledge of PrEP Practice

Have you ever heard of HIV-negative individuals using HIV medication BEFORE having sex to reduce their chance of getting HIV?

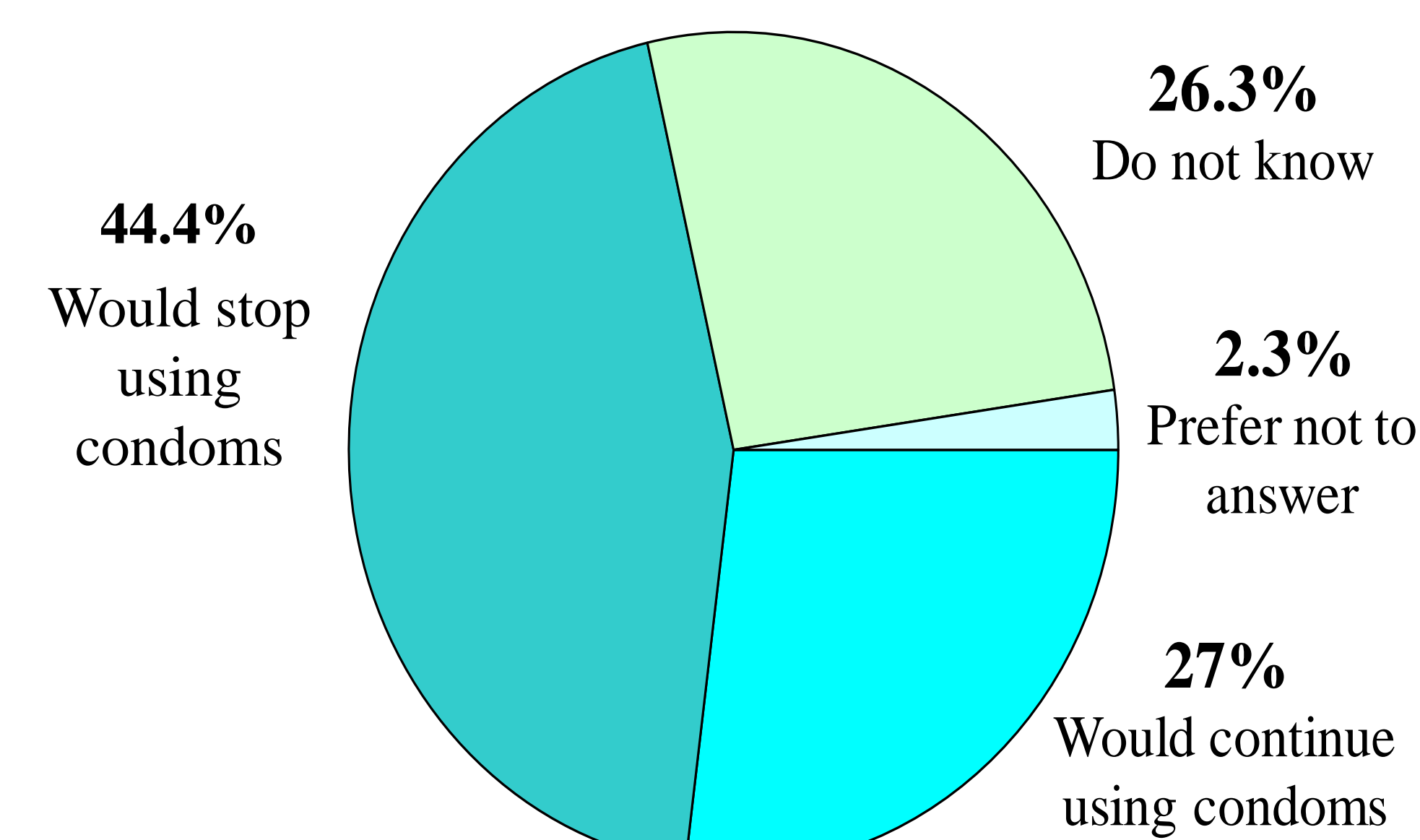


Acceptability of PrEP

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



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



Limitations

This study was conducted at an urban public hospital in the Bronx, NY that serves a low- to moderate-income patient population; 80% of the participants in this study are racial or ethnic minorities. It is unclear whether there would be significant differences in knowledge and acceptability of PrEP among people with different demographic, socio-economic or educational profiles.

Conclusions

- Prescribers of PrEP must consider the limitations of patient acceptability and adherence facing this HIV prevention strategy.
- Implementation of PrEP must incorporate education to ensure that patients understand the technology's limitations and potential side effects.

Future Directions

Future analysis will determine if any associations exist between participant demographics and knowledge and/or acceptance of PrEP.

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