

Reproductive and Sexual Health



Webinar – HIV Pre-Exposure Prophylaxis (PrEP) in DoD

As of 20 Aug 2015

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NAVY AND MARINE CORPS PUBLIC HEALTH CENTER
PREVENTION AND PROTECTION START HERE

What if there were a pill that could help prevent HIV?

There is.

Ask your doctor if PrEP is right for you.

Pre-exposure prophylaxis: A daily pill to reduce risk of HIV infection

www.cdc.gov/hiv/basics/prep.html



The views expressed in this briefing are those of the authors and do not necessarily reflect the official policy or position of the Department of the Navy, Department of Defense, nor the U. S. Government

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- Lt Col Jason Okulicz, San Antonio Military Medical Center
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Webinar Courtesy

- Good Morning and thank you for joining us!
- To listen to the presentation, use the dial in: (877) 885- 1087 Code: 704 516 0523#
- We ask that all participants please mute your phone lines either by pressing *6 or the mute button on your phone.
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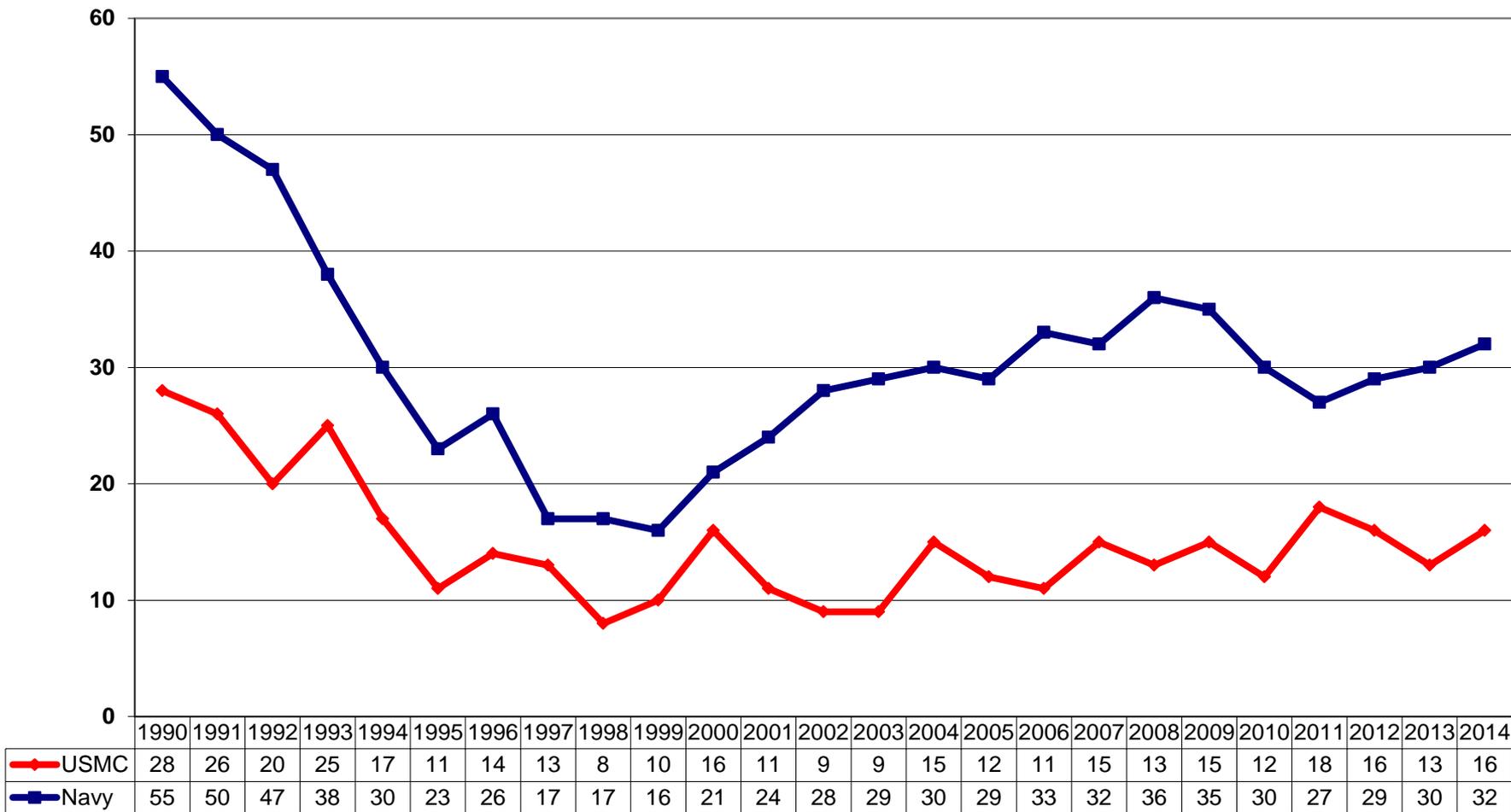


Learning Objectives

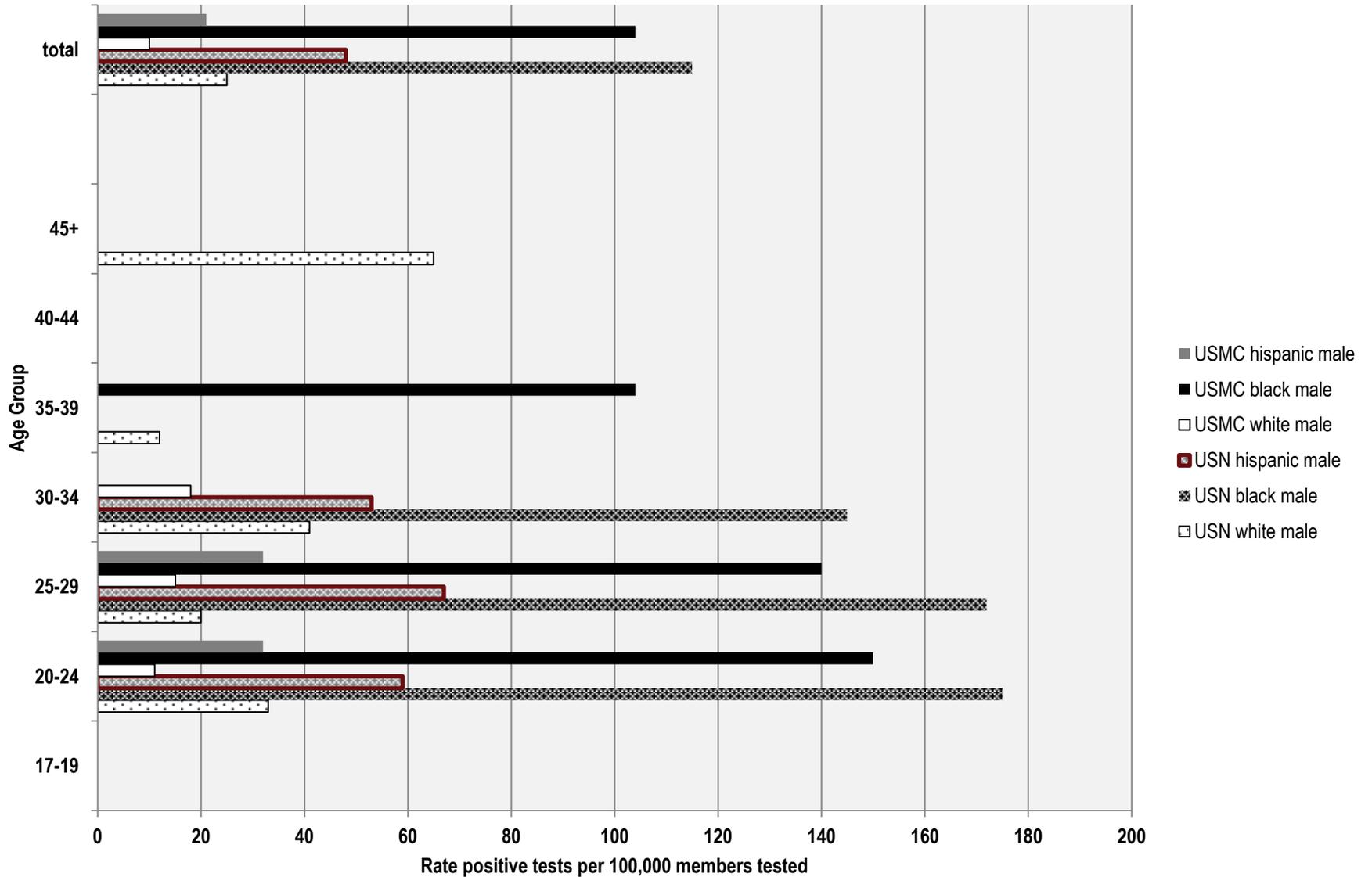
- HIV Incidence in the DoN/DoD (Bob MacDonald)
- Purpose of HIV PrEP and Patient Eligibility Criteria (CAPT Beckett)
- Medication Accessibility (CAPT Beckett)
- HIV PrEP Clinical Practice Guidelines and Resources (CDR Carpenter)
- HIV PrEP Promotion and Resources (Bob MacDonald)
- Experiences and Observations of HIV PrEP Providers at
 - Walter Reed National Military Medical Center (MAJ Blaylock)
 - San Antonio Military Medical Center (Lt Col Okulicz)
 - Naval Medical Center Portsmouth (Gerry Tarr)
 - Naval Medical Center San Diego (Kevin O'Brien)



Navy and Marine Corps Public Health Center
HIV Seroconversion Rates per 100,000 Active Duty Sailors and Marines Tested
 source: Navy Bloodborne Infection Management Center, unpublished data



HIV Seroconversion Rates Among Active Duty Male Enlisted Sailors and Marines, CY2014 (n= 70 Sailors; 23 Marines).
 Source: NMCPHC-Navy Bloodborne Infection Management Center; unpublished data ; June 2015



Self-reported HIV Transmission Risks; HIV-diagnosed Active Duty Sailors and Marines 2010-2013 (n=257) Source NMCPHC unpublished data; June 2015

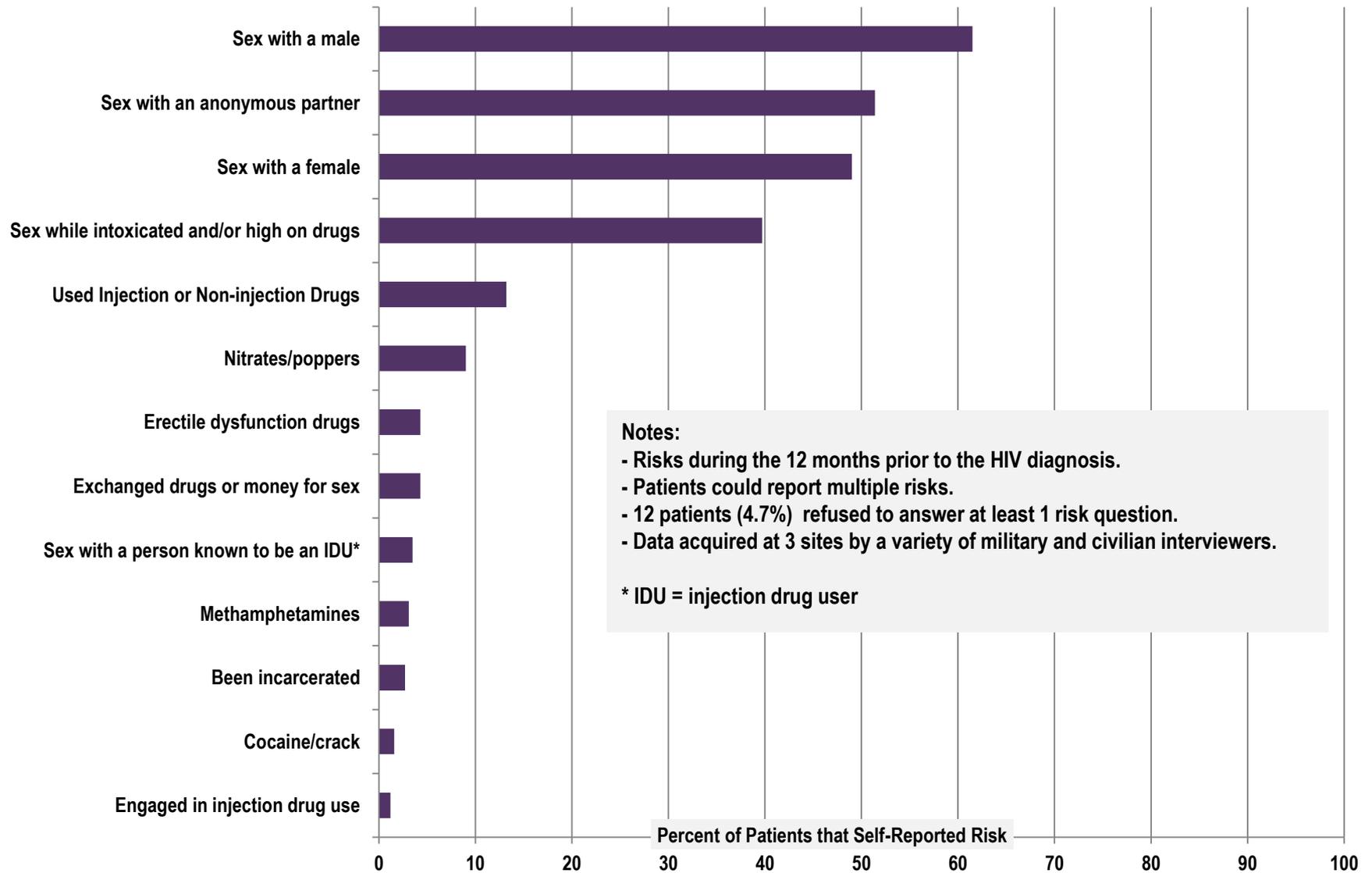


FIGURE 3. New diagnoses of HIV infections, by gender, active component, U.S. Army, January 2009–June 2014

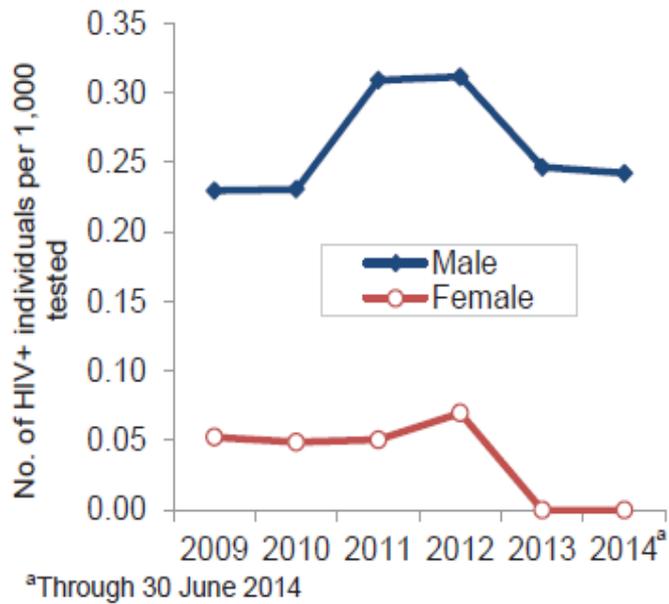
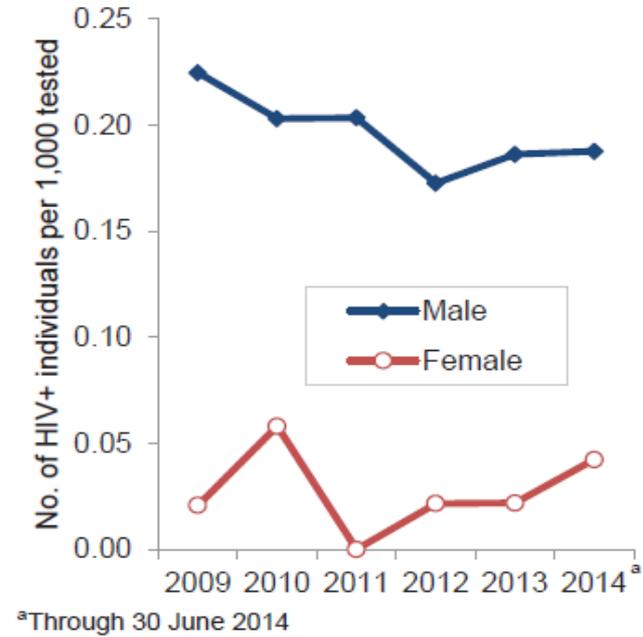


FIGURE 6. New diagnoses of HIV infections, by gender, active component, U.S. Air Force, January 2009–June 2014



Source: Routine Screening for Antibodies to HIV, Jan 2009-Jun 2014. AFHSC; MSMR 21:8;16. [http://www.afhsc.mil/documents/pubs/msmrs/2014/v21_n08.pdf#page=16; accessed 9 Jul 2015]



Purpose of HIV PrEP and Patient Eligibility

Table 1: Summary of Guidance for PrEP Use

	Men Who Have Sex with Men	Heterosexual Women and Men	Injection Drug Users
Detecting substantial risk of acquiring HIV infection	HIV-positive sexual partner Recent bacterial STI High number of sex partners History of inconsistent or no condom use Commercial sex work	HIV-positive sexual partner Recent bacterial STI High number of sex partners History of inconsistent or no condom use Commercial sex work In high-prevalence area or network	HIV-positive injecting partner Sharing injection equipment Recent drug treatment (but currently injecting)
Clinically eligible	Documented negative HIV test result before prescribing PrEP No signs/symptoms of acute HIV infection Normal renal function; no contraindicated medications Documented hepatitis B virus infection and vaccination status		
Prescription	Daily, continuing, oral doses of TDF/FTC (Truvada), ≤90-day supply		
Other services	Follow-up visits at least every 3 months to provide the following: HIV test, medication adherence counseling, behavioral risk reduction support, side effect assessment, STI symptom assessment At 3 months and every 6 months thereafter, assess renal function Every 6 months, test for bacterial STIs		
	Do oral/rectal STI testing	Assess pregnancy intent Pregnancy test every 3 months	Access to clean needles/syringes and drug treatment services

STI: sexually transmitted infection

HIV PrEP Clinical Practice Guidelines (CDC)
<http://www.cdc.gov/hiv/pdf/guidelines/PrEPguidelines2014.pdf>
 [accessed 9 July 2015]

- Patient Characteristics?
- Truvada Accessibility



HIV PrEP Clinical Resources

- HIV PrEP Clinical Practice Guideline (CDC)

<http://www.cdc.gov/hiv/pdf/prepguidelines2014.pdf>

- HIV PrEP Clinical Providers Supplement (CDC)

<http://www.cdc.gov/hiv/pdf/preprovidersupplement2014.pdf>

- HIV PrEP Webinar Series (NACCHO)

<http://www.naccho.org/topics/HPDP/hivsti/prep.cfm>

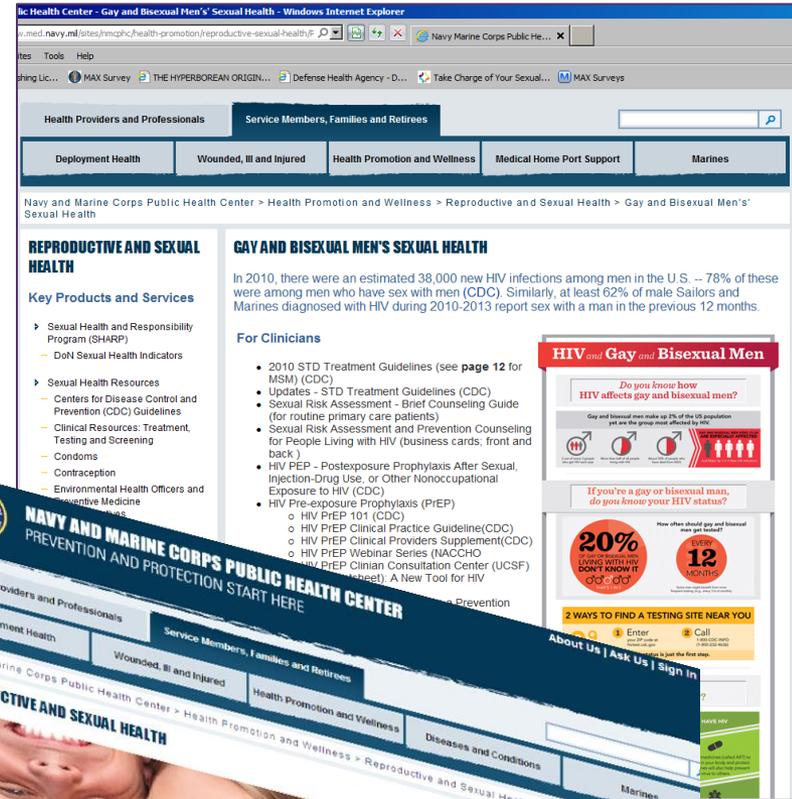
- HIV PrEP Clinical Consultation Center (UCSF)

<http://nccc.ucsf.edu/2014/09/29/introducing-the-ccc=prepline/>



HIV PrEP Promotion and Resources

- SHARP web pages:
 - HIV Prevention
 - HETU Prevention
 - Gay Men's Sexual Health
- SHARP Products
 - Films
 - Factsheets
 - Posters
 - Lectures
- SHARP Toolbox DVD
- *SHARP*News newsletter



HIV PrEP Promotion and Resources

- Films
 - HIV and Me (2006)
 - HIV Awareness (ECD 2015)
 - Male Sexual Risk Assessment (ECD 2015)
- Brief Sexual Risk Screening Guide
- Briefings
 - HIV in the DoN
 - HIV in the Workplace

Brief Guide for Sexual Risk Assessment and Intervention
— For military service members during their annual Periodic Health Assessment (PHA) or any routine encounter —

Part I – Assess Risk

1. OPENING STATEMENT(S)

"Let's talk about your sexual health for a minute".

2. PREVENTION OF PREGNANCY (MEN AND WOMEN). Determine family planning intentions and use of contraception.

"Do you or your partner want to get pregnant in the next year?" If no - What are you doing to prevent a pregnancy?"

3. PARTNERS. Make no assumptions of partner gender in the initial history taking.

"Are you presently in a relationship?" "In the past 12 months, about how many people have you had sex with?"

"Were / are your recent partner(s) men, women or both?"

4. PRACTICES. If the patient has **risk** (see inset), explore sexual behavior and circumstances.

"With your recent sex partner(s), did you engage in vaginal, oral or anal sex?"

"Regarding pregnancy and STIs, what is the riskiest thing you've done in the past 3 months?"

"How does your use of alcohol or other drugs influence your sexual decisions?"

5. PROTECTION FROM STDs. If the patient has **risk** (see inset), explore types of risk reduction the patient has used in the recent past, such as condom use.

"What do you do to protect yourself from STIs like HIV?"

"What have you done in the past to protect yourself?"

6. PAST HISTORY OF STIs. A history of STDs increases the risk of repeated infection. Affirmative answers should be followed up with questions about the type of infection and dates of treatment. Consider hepatitis B immunization.

"Have you ever had an STI?"

"Have any of your partners had an STI?"

"Do you have any symptoms/problems now?"

Continued on reverse

"Risk" of an unplanned pregnancy or STI/HIV exists:

- All sexually active adolescents
- Adult with STI (current or in the past year)
- Adult with more than 1 "current" sexual partner

ALSO Consider...

- Not wanting pregnancy but no current contraception or not using the most effective form of contraception.
- More than 1 recent sex partner (past 3 months).
- New partner in past 3 months.
- Sex partner who may have an STI.
- Exchange of sex for money or drugs.

 Navy and Marine Corps Public Health Center – Sexual Health and Responsibility Program (SHARP)
<http://www.med.navy.mil/sites/nmcphc/health-promotion/reproductive-sexual-health/Pages/sexual-health-resources.aspx> version 6/2/2015 



HIV

...Sailors and Marines should know.

HIV happens...

4

...every 4 days, another active duty Sailor or Marine is diagnosed with HIV.

...to women:
in the U.S., about 1 of 5 people that got HIV last year is a woman.



...to men.

Men who have unprotected sex with men are at highest risk of getting HIV.
Men who have unprotected sex with women can also get HIV.

But it doesn't have to...

Rx

HIV medicine can greatly reduce your risk of getting HIV. You can take one pill each day - it's called PrEP.

- or -
You can take HIV pills after an exposure - BUT you must start within 72 hrs - it's called PEP.



April 2015

Condoms used correctly and every time greatly reduce your risk.



Just pulling out, or just asking your partner if they have HIV are NOT safe strategies.



Ask for an HIV test every year if you are a man who has sex with men, or if you have sex without a condom with casual partners.



**NAVY AND MARINE CORPS
PUBLIC HEALTH CENTER**
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HIV happens...

don't let it happen to you.

Each year, over 50,000 Americans get HIV, including about 100 sailors and marines. Abstinence and mutual monogamy can eliminate your risk. Condoms - worn every time - can greatly reduce your risk.

Protect yourself.

To learn more, visit <http://www.nmcphc.med.navy.mil/healthyliving>

Every 4 days... another sailor gets HIV

...since 1985,
over 4,700
active duty sailors
have been infected
with HIV...



...enough to man
an aircraft carrier

The most common way HIV is spread is through sex.

- You can't tell for sure if a person has HIV just by looking or asking.
- You can avoid HIV by having no sex, or delaying sex until later in life.
- You can avoid HIV by having sex with only one, faithful, HIV-free partner.
- You can greatly reduce risk by using a condom every time you have sex.

Protect yourself from HIV. We need you.

Learn more - http://www.nmcphc.med.navy.mil/healthyliving/sexual_health



HIV PrEP Promotion and Resources

- CDC PrEP Poster

http://www.cdc.gov/hiv/images/web/library_infographics_prep_promo_1200x630.jpg

- CDC PrEP Patient Education Factsheet

<http://www.cdc.gov/hiv/prep/pdf/prepfactsheet.pdf>

- CDC PrEP-101 Patient Education Webpage

<http://www.cdc.gov/hiv/nasics/prep.html>

[accessed 9 Jul 2015]



Experiences and Observations of HIV PrEP Providers

- Walter Reed National Military Medical Center (MAJ Blaylock)
- San Antonio Military Medical Center (Lt Col Okulicz)
- Naval Medical Center Portsmouth (Gerry Tarr)
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Questions, Concerns, Ideas?

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Sexual Health and Responsibility Program (SHARP)
620 John Paul Jones Circle, Suite 1100
Portsmouth VA 23708



<http://www.med.navy.mil/sites/nmcphc/health-promotion/reproductive-sexual-health/Pages/reproductive-and-sexual-health.aspx>

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- The slides and audio will be archived on the NMCPHC webpage at: <http://www.med.navy.mil/sites/nmcphc/health-promotion/Pages/webinars.aspx>
- Thank you for joining us and if you have any questions, please email Bob MacDonald at michael.r.macdonald2.civ@mail.mil

