

Health Promotion & Wellness

April 2018

**Do You Know About
the HIV Pre-Exposure
Prophylaxis (PrEP)
Program?**

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**We have what you need for
Sexual Health Month**

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U.S. Navy photo by Mass Communication Specialist Seaman Michael A. Colemanberry



NAVY AND MARINE CORPS PUBLIC HEALTH CENTER
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Health Promotion News and Resources

Sexual Health Month: STI Rates Increased in 2017

In the U.S., reported gonorrhea, chlamydia and primary and secondary syphilis rates have been rising for three consecutive years. This is also true of active duty Sailors and Marines, among whom over 9600 cases were reported in 2017. Although the data are subject to variations (and perhaps continuing improvement) of reporting systems and screening practices, these rising rates are concerning. HIV cases and rates among male Sailors and Marines are also up in 2017. Data from the 2016 NMCPHC Workplace HRA indicate that about 1 of 5 male and female Sailors and Marines self-report recent condomless sex outside of a monogamous relationship.



Some recommendations to address these rising rates of bacterial STIs include:

- Ask your patients about their sexual health to identify those at risk, then intervene
- Women up to age 24 (and older women at heightened risk) should be screened for Chlamydia annually
- Men who have sex with men should be screened for HIV and syphilis at least annually
- HIV PrEP patients should be screened for syphilis, gonorrhea and chlamydia (at all appropriate anatomical sites) every 6 months
- Treat infected patients in accordance with the CDC's 2015 STD Treatment Guidelines
- Men and women treated for gonorrhea, chlamydia or Trichomoniasis should be retested 3 months post treatment
- Pregnant women with chlamydia infection should be retested 3-4 weeks and 3 months post-treatment
- Work with STI patients to bring their recent sexual partners to treatment
- Educate your population about STI prevention

April is sexual health promotion month. Please get and use STI prevention resources from the April Sexual Health Toolbox: <http://www.med.navy.mil/sites/nmcphc/health-promotion/Pages/hp-toolbox-april.aspx>

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

See the U.S. data at: <https://www.cdc.gov/std/stats16/default.htm>

See DoN data (CaC required) at: <http://www.med.navy.mil/sites/nmcphc/health-promotion/reproductive-sexual-health/Pages/sexual-health-indicators.aspx>

Public Health Center Contributes to Community Preventive Services Task Force Annual Report to Congress

Mr. Bill Calvert, deputy director of the Population Health Directorate at the Navy and Marine Corps Public Health Center (NMCPHC), collaborated with the Community Preventive Services Task Force (CPSTF) to support its [2017 Annual Report to Congress: Providing the Science to Support Military Readiness and Resilience](#).

This report highlights how CPSTF recommendations are used to support the readiness and resilience of service members with an emphasis placed on the challenges of obesity, tobacco use and excessive alcohol use. The report also identifies important evidence gaps researchers, evaluators and funders may choose to address as well as priority areas for future CPSTF work.



Mr. Calvert, who serves as the [Navy Liaison for the CPSTF](#), shared how the Department of the Navy (DON) uses recommendations from the [Guide to Community Preventive Services \(The Community Guide\)](#) to drive and support policy changes as well as design, benchmark and improve interventions that enhance the health, safety and wellbeing of service members, beneficiaries and civilians.

Obesity, tobacco use and alcohol abuse pose significant threats to military readiness and resilience. The Community Guide was cited in position papers that drove changes to the DON's tobacco policy which included prohibiting tobacco use on submarines and medical facility campuses as well as eliminating the discounted pricing for tobacco products. The recommendations were also used to design and implement various individually adopted behavior change programs and worksite health programs, such as the "Navy's Culture of Fitness" and point-of-decision prompts. NMCPHC implemented a [Health Risk Assessment \(HRA\)](#) program that provides service members direct feedback on lifestyle behaviors in combination with other interventions and the [Blue-H Navy Surgeon General's Health Promotion and Wellness Award](#) program which is awarded to commands who follow criteria based on effective workplace programs.

"The Community Guide remains my best reference to incorporate interventions proven to work, which is valuable for the Navy given its limited resources. This is important, especially with the impending changes resulting from the National Defense Authorization Act (NDAA) for Fiscal Year 2017," said Mr. Calvert, "Our focus is to support a medically ready force and improve the adoption of lifelong healthy behaviors for our service members. The Community Guide helps us do that and meet our mission".

The [CPSTF](#) is an independent, nonfederal, nonpartisan panel of experts in public health appointed by the Director of the Centers for Disease Control and Prevention (CDC). Its members represent a broad range of research, practice and policy expertise in community preventive services, public health, health promotion and disease prevention. The CPSTF helps improve the health of all Americans by identifying community preventive programs, services and other interventions that save lives and dollars, increase longevity and improve quality of life.

To learn more about the health promotion programs at NMCPHC, visit: www.med.navy.mil/sites/nmcphc/health-promotion/Pages/default.aspx.

2018 NMCPHC Conference: Inspiring HPW Tracks

The NMCPHC Conference was held in March 2018, after a long hiatus. This conference was kept small due to first year limitations. NMCPHC was anticipating quite a bit of interest, but there were so many more people requesting to come than we expected. Hugh Cox, the Conference Coordinator, stated he was hoping 250 people would sign up and there was close to 500 that actually did.

Mark Long, NMCPHC Public Health Educator said his favorite part of the conference was "Networking, supporting one another and leaving with more positive energy."

The Health Promotion and Wellness track covered injury prevention, chronic conditions, population health initiatives,



U.S. Navy photo by Kate Geusic



fleet health promotion, HIV statistics, and HIV Pre-Exposure Prophylaxis (PrEP) Programs. Plus, updates on nutrition, UCANQUIT2, and That Guy. These were well attended and all received great reviews.

When asked what her favorite part was, Samantha Wright, NMCPHC Public Health Educator said “It’s hard to choose one part, but I really enjoyed the poster presentations. There is so much exciting research and many great programs going on across the DoD. It was fun to learn how they impact our active duty service members’ readiness and their families’ health.”

“It was wonderful seeing what everyone is doing in the Navy. So many people have such passion for prevention, it is inspiring” said Jenni Osborne, NMCPHC Public Health Educator. “There wasn’t a dry eye in the PrEP Class.”

The HPW department will be looking at implementing some of the ideas that were presented at this year’s event to make next year’s conference even better. If you also have ideas, please let us know so we can consider them during our planning for next year’s conference. Keep an eye out, as we will provide updates in this newsletter to ensure you’re kept in the know for NMCPHC Conference 2019!

Training and Events

Our education and training programs equip Navy and Marine Corps command personnel with the tools, education and programmatic materials required to deliver best-practice programs and interventions at the local command level. A complete list of all [HPW Training](#) for FY18 will be released soon and viewed at [HPW Training schedule](#).

For further information and/or to request a Quota Request Form to attend any of this training, send an E-mail to: usn.hampton-roads.navmcpubhlthcenpors.list.nmcpHC-hpw-training@mail.mil.

Partnership and Sharing

Partner Spotlight: Naval Medical Center Camp Lejeune Implements HIV Pre-Exposure Prophylaxis (PrEP) Program

Lt. Joseph Biddix, RN-BC, NC, USN
Hospital Corpsman 2nd Class (FMF) Ian Carroll
Navy Medical Center Camp Lejeune

HIV Pre-Exposure Prophylaxis (PrEP) therapy consists of taking Truvada (emtricitabine 200mg/tenofovir 300mg) once daily to prevent HIV infection. Per the Centers for Disease Control (CDC), daily PrEP therapy lowers one’s risk of acquiring HIV by 92% or more. There is even greater protection from HIV infection when PrEP is used in conjunction with condoms. While PrEP is mostly managed by Infectious Disease clinics at large Medical Treatment Facilities (MTF), there is no requirement that PrEP must be managed by an Infectious Disease specialist. In fact, the San Antonio Military Medical Center Infectious Disease PrEP Team has created a PrEP Provider Reference Kit to help any doctor, nurse practitioner, or physician assistant to become a PrEP provider.

NMC Camp Lejeune does not have an Infectious Disease specialist or Preventive Medicine physician billeted to the hospital, so we’ve adapted with the resources we have. In early 2016, a need was identified at Camp

Upcoming Training FY18



NAS Pensacola, FL

- Health Promotion Advanced Training
11-12 June, 2018: 8:00 AM - 4:30 PM
- ShipShape Program Facilitator Training
13 June, 2018: 8:00 AM - 4:30 PM
- Tobacco Cessation Facilitator Training
14 June, 2018: 8:00 AM - 4:30 PM

Camp Pendleton, CA

- Health Promotion Advanced Training
26-27 June, 2018: 8:00 AM - 4:30 PM
- ShipShape Program Facilitator Training
28 June, 2018: 7:30 AM - 4:30 PM
- Tobacco Cessation Facilitator Training
29 June, 2018: 7:30 AM - 4:30 PM



Lejeune to create a formalized process for Marines and Sailors seeking to initiate PrEP. Sailors and Marines were frequently requesting this service at Preventive Medicine. A common theme kept arising when these members expressed frustration accessing PrEP, and that was that they were consistently told by medical staff on base that PrEP was not available to active duty service members despite DoD approval stating otherwise. Our Deputy Director for Public Health at the time set a plan of action in place that included gaining buy-in from the MTF chain of command and the Preventive Medicine community at II Marine Expeditionary Force. Upon receiving their support, the NMCCCL Preventive Medicine Department went to work getting their lab set up appropriately, including the purchase of a centrifuge, creating the appropriate screening questionnaires based off CDC recommendations, and training staff members on what PrEP is, and how to manage it.



U.S. Navy photo by Kate Geusic

In April 2016, the PrEP team from NMC Portsmouth came to Camp Lejeune and provided training to physicians, nurses, pharmacists, and corpsmen on PrEP management. Initially, our program was set up with one provider, an internal medicine physician, prescribing Truvada. However, the PrEP team's word-of-mouth efforts and utilization social media and mobile dating apps generated high demand for PrEP services. It was determined that we needed to expand our base of providers who could prescribe Truvada. Using the training materials from NMC Portsmouth and the Navy and Marine Corps Public Health Center, we trained 22 Family Medicine residents and staff physicians who volunteered to be PrEP providers. Our program now manages approximately 40 active duty Marines and Sailors on PrEP. Of note: by managing our own PrEP population, we are also saving money. The MTF pays a discounted rate for Truvada, and filling the prescription at our pharmacy instead of having our 40 members fill the medication at a local pharmacy (e.g. Walgreens) saves over \$545,000 annually. The program is managed by an active duty nurse corps officer in Family Medicine and a corpsman in Preventive Medicine. Physician oversight is provided by both an internal medicine physician and preventive medicine officer. We continuously provide training for awareness on base and have reached over 110 greenside corpsmen and 55 providers.

Part of the success of our program is that we strictly adhere to CDC guidelines for prescribing Truvada as PrEP. It is essential that members on PrEP are tracked appropriately to ensure they are getting their regular STI screenings and lab work. Per the CDC, individuals on PrEP must have an HIV test done every 3 months and should never receive more than a 3-month's supply of Truvada. The CDC also recommends a full STI lab panel be performed every 3 to 6 months, or as needed should the patient present with symptoms. The STI panel includes an RPR and screening of gonorrhea and chlamydia (GC) from 3 sites (urine, pharyngeal, and rectal). The importance of 3-site testing cannot be overstated. At Camp Lejeune, 43% of our PrEP population screened positive for a bacterial STI, with the vast majority of those positive results being either rectal (70%) or pharyngeal (40%) GC. Only one member had a positive urine GC. What this demonstrates is that when screening men who have sex with men, 3-site GC testing is an absolute must. Due to our high rate of bacterial STIs, we are screening all of our members in the PrEP program every three months.

As our program has grown, we have received requests from other MTFs regarding how to establish their own program. We have created a master list of PrEP programs both CONUS and CONUS across the Navy, Army, and Air Force to provide a network for information sharing and communicating best practices.

