'PREVENTION BY PROXY': HOW MUCH DO GAY AND BISEXUAL MEN WHO ARE NOT ON PREP RELY ON THEIR CASUAL PARTNERS' PREP USE AND UNDETECTABLE VIRAL LOAD?

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Background:

In Australia, gay and bisexual men (GBM) increasingly use biomedical HIV prevention strategies, particularly pre-exposure prophylaxis (PrEP) and U=U. However, a minority of non-HIV-positive GBM continue to report condomless sex with casual partners (CAIC) while not taking PrEP themselves ("at risk" GBM). We assessed trends in PrEP sorting (knowing partners are on PrEP before CAIC) and viral load sorting (knowing partners have an undetectable viral load) by "at risk" GBM, i.e. biomedical "prevention by proxy".

Methods:

Data were collected from national HIV behavioural surveillance surveys (2017-2023) with recruitment at events, venues, and online. Among "at risk" participants, we assessed trends in, and factors associated with, PrEP and viral load sorting, and any biomedical prevention by proxy.

Results:

Among 35,902 GBM who reported sex with casual male partners (last 6 months), the proportion "at risk" decreased from 29.7% in 2017 to 19.2% in 2023 (OR=0.91, 95%CI=0.90-0.92). Among "at risk" participants, between 2017 and 2023 the proportion reporting any viral load sorting increased from 21.6% to 25.7% (OR=1.04, 95%CI=1.02-1.07), any PrEP sorting increased from 43.3% to 55.2% (OR=1.08, 95%CI=1.05-1.10), and any biomedical prevention by proxy increased from 47.1% to 58.1% (OR=1.07, 95%CI=1.05-1.09). Among "at risk" participants, biomedical prevention by proxy was associated with >10 partners in the past 6 months (aOR=1.66, 95%CI=1.48-1.86), HIV testing (aOR=2.42, 95%CI=2.16-2.72) and any STI diagnosis (aOR=1.34, 95%CI=1.19-1.50) in the last year, and having a regular partner (aOR=1.19, 95%CI=1.08-1.32).

Conclusion:

With increasing use of PrEP and U=U, and the decreasing proportion of GBM who report HIV risk with casual partners, PrEP and viral load sorting are further mitigating HIV risk for GBM not on PrEP. However, given GBM relying on biomedical prevention by proxy have more frequent sex than other non-PrEP-using GBM, it may be worthwhile promoting the adoption of prevention strategies more under their own control.

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