



# PERCEPTIONS OF HIV PRE-EXPOSURE PROPHYLAXIS AMONG PEOPLE WHO INJECT DRUGS

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## Acknowledgements

- Many thanks to the KRC and MSIC clients who complete surveys for this study and members of the Aboriginal Reference Group who shared their insight and expertise.

## Disclosures

- The investigators have no conflicts to declare with respect to this study.

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## BACKGROUND/AIMS & METHODS:

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- People who inject drugs (PWID) are a priority population in Australian HIV Strategy, but generally are not eligible for HIV pre-exposure prophylaxis (PrEP) unless other risk factors are present
  - Need to address concerns that medicalisation of HIV prevention could detract from proven harm reduction measures
  - Aim: to determine perceptions, eligibility and willingness to use PrEP among PWID in inner Sydney
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- Cross-sectional survey of clients attending the Kirketon Road Centre (KRC) or the Uniting Medically Supervised Injecting Centre (MSIC) conducted in December 2016
  - Questions regarding demographics, perceived risk of HIV, knowledge and attitudes towards PrEP, willingness to use PrEP, and anticipated risk compensation
  - Descriptive and stratified analyses including Chi-square or binomial tests of significance and univariate logistic regression to determine significant associations
    - Stratification based on having heard of PrEP before the survey; identifying as gay or bisexual; perceived risk of acquiring HIV

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## RESULTS:

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- 193 respondents
  - mean age 41 years, 68% male, 32% Indigenous, 34% identify as gay or bisexual
  - mean duration of injecting 22 years, 89% injected in last month, 19% receptive syringe sharing
  - 50% had heard of PrEP
  - 18/172 (10.4%) HIV negative respondents met eligibility criteria for PrEP
    - 2.5% of heterosexual respondents met eligibility criteria
- Among those who had heard of PrEP and were not HIV positive (n=86):
  - 83% would be willing to take PrEP to prevent HIV
  - 93% thought they would continue using harm reduction services
  - 92% likely to maintain consistent use of unused needles
  - 23% would be less concerned about HIV status of injecting partners; 17% would be less concerned about hepatitis C status of injecting partners
  - Significantly higher proportion of those willing to take PrEP reported receptive syringe sharing in the last month than those not willing to take PrEP (20% v 15%, p=0.013)

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## CONCLUSIONS/IMPLICATIONS:

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- Survey participants who knew about PrEP were willing to take PrEP in the future if recommended and indicated low likelihood of risk compensation
- High coverage NSP & OST, and other harm reduction measures are mainstay of HIV prevention among PWID
- PrEP may benefit a small proportion of PWID which may equate to several thousand people nationally
- Often marginalised community of PWID should continue to be engaged in discussion about PrEP as means of HIV prevention without detracting from existing harm reduction services
- Participants eligible for PrEP have now been offered this intervention

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