

# ASSESSING RISING DOXY-PEP USE, SUITABILITY, AND TARGETING AMONG GAY AND BISEXUAL MEN AND NON-BINARY PEOPLE IN AUSTRALIA: RESULTS OF NATIONAL BEHAVIOURAL SURVEILLANCE 2024-25

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## Background:

Doxycycline post-exposure prophylaxis (doxy-PEP), a 200mg dose within 72 hours of sex, can reduce the risk of acquiring STIs. The 2024 Australian consensus statement suggests recent STI diagnoses and ongoing risk as indications for doxy-PEP, but the degree of use by suitable people is unknown. We assessed doxy-PEP awareness, use, and levels of suitability among gay and bisexual men and non-binary (GBQ+) people in Australia.

## Methods:

Data from 5 state/territory rounds of the GBQ+ Community Periodic Surveys, community-based and online surveys, were included (2024-25). Groups who were suitable/non-suitable for doxy-PEP and using/not using it were compared with chi-square tests.

## Results:

Of 7,936 participants, median age was 36 years, 78.2% were gay-identified, 90.2% cisgender men, 42.4% using HIV PrEP. 57.3% were aware of doxy-PEP (range 37.4-61.7% by state/territory), and 10.6% had used it in the last 6 months (range 5.7-12.4%). 28.3% of the sample appeared suitable for doxy-PEP, the most common criteria being diagnosis with  $\geq 2$  STIs in the past year (8.7%), attending sex venues (8.5%), monthly group sex (8.3%), and having both male and female casual partners (7.7%). Of doxy-PEP users ( $n=838$ ), 60.7% reported at least one suitability criterion. Compared with suitable users, suitable non-users were more likely to be trans or bi+, have a female or non-binary relationship partner, and less likely to be full-time employed, using HIV PrEP, or recently tested for HIV or STIs. Compared with suitable users, non-suitable users were more likely to be gay-identified, had fewer partners, and less likely to be recently diagnosed with a STI.

## Conclusion:

The majority of doxy-PEP users are GBQ+ people at higher risk of STIs, but a third of current users appear to be lower risk. Promoting doxy-PEP to people who report greater risks for STIs, including trans and bi+ people and people who test less often, may improve its targeting.

## Disclosure of Interest Statement:

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