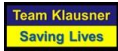


# Interventions internationally which have reduced access gaps

**Jeffrey D. Klausner, MD, MPH**  
**Professor of Medicine and Public Health**

**Division of Infectious Diseases**  
**Department of Epidemiology**  
**University of California, Los Angeles**

2017 Australasian HIV & AIDS Conference and 2017 Australasian Sexual Health Conference  
Canberra



## Disclosures

- In the past 12 months, I have received scientific advisory board fees from GSK and Cepheid
- I have received research grant funding from Gilead
- I serve on the WHO STI Treatment Guidelines work group
- I chair 2 NIH-funded FDA clinical studies on STI diagnostics
- Advisor to MyLabBox.com, SafeMovement and Healthvana

## Access

- Testing
- Treatment
- Adherence
- Prevention
- Policy

## Testing in Community-based Settings



# Testing in Community-based Settings

716 MMWR July 10, 2009

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## Clinic-Based Testing for Rectal and Pharyngeal *Neisseria gonorrhoeae* and *Chlamydia trachomatis* Infections by Community-Based Organizations — Five Cities, United States, 2007

...serving MSM, CDC and the San Francisco Department of Public Health gathered data on rectal and pharyngeal gonorrhea and chlamydia testing at screening sites managed by six gay-focused community-based organizations in five U.S. cities during 2007. This report summarizes the results of the study, which found that three organizations collected samples for NAA testing and three for culture. In total, approximately 30,000 tests were performed; 5.4% of rectal gonorrhea, 8.9% of rectal chlamydia, 5.3% of pharyngeal gonorrhea, and 1.6% of pharyngeal chlamydia tests were positive. These results demonstrate that gay-focused community-based organizations can detect large numbers of gonorrhea and chlamydia cases and might reach MSM not being tested elsewhere. Public health officials could consider providing support to certain community-based organizations to facilitate testing and treatment of gonorrhea and chlamydia.

Gay-focused community-based organizations provide medical and social services and are guided and staffed by paid or unpaid community residents with various skill levels, including some who might have medical, nursing, or counseling backgrounds (4). Funding and other resources are provided by private and public sources. Many gay-focused community-based organizations in cities with large MSM, lesbian, and bisexual populations offer alternative venues to traditional public STD clinics and private physicians by providing onsite STD screening and treatment services. Gay-focused community-based organizations typically do not require health insurance for access, are located in neighborhoods with many MSM, and provide culturally competent services for a historically

## Walk-in self-testing for STDs

Dean Street Express, London  
High Volume at Point of Care



- ✓ Faster Results: From 183 hours to 4 hours
- ✓ Quicker Treatment: 80% reduction in time to treatment
- ✓ Reduced Waiting Time: From 2 hours to 32 minutes
- ✓ Less Patients Lost to Follow-Up: From 3.8% to 1.2%
- ✓ For every 2 people diagnosed 1 partner spared exposure
- ✓ High Uptake: Monthly increase in testing ~600%
- ✓ Rated "Excellent" by 94% of users

**A total of 12,500 people attend the clinics each month, 60% MSM  
The clinics diagnose half of all HIV infections in MSM in London (50% recent)**

# Self-Testing for HIV infection

**The first in-home oral HIV test**

- **Trusted:** The same test healthcare professionals have used for years.
- **Fast:** Results in 20 minutes.
- **Oral:** A quick oral swab... no blood required.
- **Confidential:** 24/7 call-center support.
- **Safe & Effective:** FDA approved.

[Learn More](#)

## OraQuick® In-Home HIV Test, US

### Projection of Positives Identified, among 1.2M tests sold, 2013-2017

The estimated prevalence rate between 1- 2%

Theoretical Projection of Total Number of Positives Identified Based on Consumer Support Center Activity			
	731 Positives* Identified via Consumer Support Center		
% of Positives Calling Support Center	1%	5%	10%
Projected Total Number of Positives	73,100	14,620	7310
Positives as Percent of Units Sold to date	6.1%	1.2%	.6%

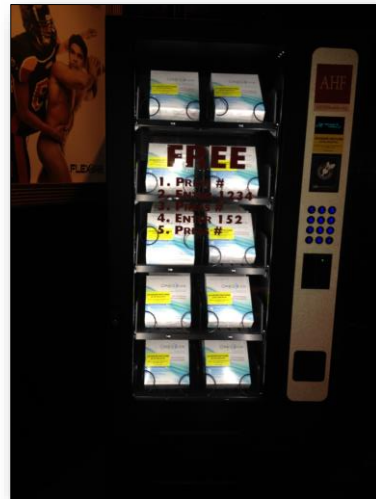
\*Positives captured launch through 6/30/17 Based on prelaunch research indicating that most (96%) consumers receiving positive result will contact their healthcare professional; ~1.2M units sold Jan 2013 through July 2017



Confidential & Proprietary

## Vending Machines in LA sex clubs

- Self-contained unit
- Remote monitoring
- Instructions posted
- Private area



McGrath M et al, CROI pre-meeting, 2015

## Outreach Vouchers



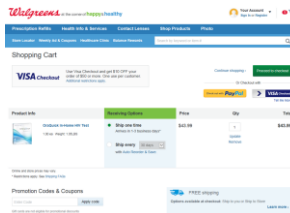
# Social media



banner ad

Huang, AIDS Edu Prev 2016

# Self-test Access Choices



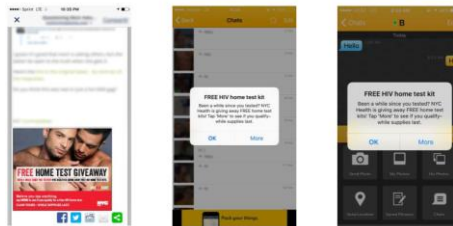
Huang et al AIDS Edu Prev 2016

## Self-testing dissemination-NYC

**Goal:** Distribute 2,000 HIV in-home test kits to men and transgender individuals who have sex with men (MTSM)

- Tests sent at no cost, through the mail
- Conducted entirely online – recruitment, eligibility assessment, kit order

Recruitment: Dating apps and websites



\*over 3 weeks

Edelstein, APHA, 2016

## STD Testing Home-collection myLABBox.com

The screenshot shows the myLAB Box website homepage. At the top, it says 'myLAB Box WOMEN OWNED'. Below that, a blue banner reads 'Never Worry Again The first nationwide home STD testing service is here.' with a 'GET RESULTS' button. The main content area features three numbered steps: 1. Test At Home, 2. Get Results, and 3. Free Consultations. Below this are logos for Forbes, Fox, CBS, and MedHub. A central section titled 'IT'S THE AGE OF ON-DEMAND EVERYTHING' includes a testimonial from 'TRUSTED' with a 5-star rating and a 'GET RESULTS' button. At the bottom, there are sections for 'TESTING TO TREATMENT WE HAVE YOU COVERED' and 'FREE INDIVIDUAL TREATMENT'. The footer contains a disclaimer about laboratory partnerships and data security.

myLAB Box has completed thousands of tests in all 50 states  
over 160% increase in demand from 2016 to 2017

## Treatment

### South Africa's latest weapon against HIV: street dispensers for antiretrovirals

Patients will no longer need to join five-hour-long queues for their medication



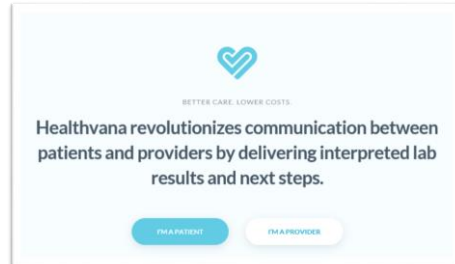
## MSF Treatment Clubs



N Engl J Med 2015; 372:301-303



# Adherence



# Prevention



**Meechai Viravalady**  
Thailand



**South Africa**

# Online PrEP, US

ID #: 374551

**PrEPTECH: Bringing PrEP Access and Adherence Online**  
 C Bannister<sup>1</sup>, MM. Kimble<sup>2</sup>, J Lykens<sup>2</sup>, C Silva<sup>1</sup>, B Sheoran<sup>1</sup>, JD Klausner<sup>2</sup>  
 YTH (Youth+Tech+Health), UCLA David Geffen School of Medicine  
 APHA 2017 | Atlanta | Nov. 4-8

**PrEPTECH** is a better way to get PrEP than going to a doctor's office or clinic.

**Agree compliance**  
 Agree regularly  
 Not at all agree or disagree  
 Disagree completely

**How much does the online PrEPTECH program help you best compared to your ability to get PrEP from your doctor?**

**How much does the online PrEPTECH program help you remember to take your PrEP medication?**

**How convenient do you think the online PrEPTECH program is compared to other forms of getting on PrEP?**

**Conclusion**

PrEPTECH is an innovative and easily accessible technology-based HIV prevention program for YTHSR designed to help kick-start PrEP initiation.

PrEPTECH enables individualized ongoing adherence and digital support.

PrEPTECH is a highly promising biomedical prevention approach for young, hard-to-reach populations.

Future HIV prevention and PrEP access programs should consider the success of PrEPTECH to enhance medical access among YTHSR.

This study was funded and made possible by GILEAD

**Introduction**

Despite the advancement of pre-exposure prophylaxis (PrEP) and other antiretroviral HIV prevention treatments, new HIV infections remain particularly high among YTHSR of color; the corresponding cost, stigma, and logistics make in-person HIV prevention outreach difficult. Novel HIV prevention programs and technology-based interventions to medication access are therefore urgently needed.

**PrEPTECH is a HIPAA-compliant online HIV PrEP management program (www.preptechyouth.org) designed to provide YTHSR easy access to PrEP. All PrEPTECH procedures are streamlined online, including: (1) assessment, PrEP education, transportation, pharmaceutical delivery, and adherence support. PrEPTECH is the first of its kind to offer patients medication access that would be otherwise difficult to obtain without the aid of a digital solution program.**

**Methods**

25 HIV-uninfected YTHSR aged 18-24 years were recruited from the San Francisco Bay Area into longitudinal study between November 2016-May 2017.

Through PrEPTECH, all participants received:

- Custom daily SMS and email adherence reminders
- Weekly health tips
- Three 30-minute telemedicine appointments with a UCLA medical provider
- 3-month mailed supply of Truvada® at baseline and 90-days
- A behavioral and participant satisfaction/adherence survey at 30, 90, and 180-day

**Results**

- Mean age was 22.5 years (SD=1.72), with a majority (84%) being YTHSR of color: 40% Latino, 28% Asian, 6% Black, 8% Middle Eastern or Other, with 16% White.
- Sixty-four percent (16/25) have completed the study at the time of this presentation.
- Thirty-seven percent (9/16) have successfully transitioned PrEP treatment to another provider; 27% (3/16) are in the process of treatment; 20% (4/16) have discontinued PrEP.
- Twelve percent (3/25) discontinued PrEP by 90-days due to personal reasons (2) and medication side-effects (1).
- Sixty-three percent (12/19) reported that PrEPTECH texts and emails help as a medication reminder.

**How convenient do you think the online PrEPTECH program is compared to other forms of getting on PrEP?**

**What makes PrEPTECH effective?**

What makes PrEPTECH effective?	PrEPTECH	Other PrEP features
Streamlined	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Easy to use	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Reminders	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Education	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Transportation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pharmaceutical delivery	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Adherence support	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Telemedicine	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Cost	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Stigma	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Logistics	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**\*As everything is online, it makes it easier to take PrEP. And I wouldn't do it without PrEPTECH.\***  
 -PrEPTECH User

# Policy

- Since the 1980s, affected populations engaged in HIV prevention policy
- In some places, community participation is required by law
- Slower uptake in STD prevention community
- Declining participation in high-income settings



# Thank you

- NIH Center for HIV Identification, Prevention and Treatment Services
- NIH Center for AIDS Research
- NIH Fogarty Center
- NIH NIAID
- NIH NICHD

