

# ENROLMENT CHARACTERISTICS ASSOCIATED WITH PARTICIPANTS WHO DISENGAGED FROM THE VICTORIAN PREP IMPLEMENTATION STUDY

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## Introduction:

There are limited data on the characteristics of people who commence and then cease PrEP. In Victoria, PrEP has been available predominantly through the PrEPX study. In this study, participants were provided with three-month PrEP prescriptions dispensed at study pharmacies. Using baseline enrolment and pharmacy dispensing data we explore the characteristics of PrEPX participants who did not remain in the study to better understand this population.

## Methods:

Victorian PrEPX participants enrolling between 26July2016 and 31December2016 were included; each participant was followed for 14 months post-enrolment. Using pharmacy dispensing data we classified participants as receiving one, two, three or more ( $\geq 3$ ) dispenses. We use step-wise multivariate logistic regression to explore covariates associated with one or two dispensing compared to clients with  $\geq 3$  dispenses. We assess difference in median time between dispensing among participants collecting two or  $\geq 3$  prescriptions using Mann-Whitney test. Participants diagnosed with HIV at baseline ( $n=8$ ) were excluded;  $p<0.05$  significant.

## Results:

2299 PrEPX participants were included. Over 14 months, study drug was collected once by 159 participants, twice by 169 participants and  $\geq 3$  times by 1971 participants. In adjusted regression, collection of one prescription was associated with being aged  $<25$  years (aOR:1.9, 95%CI:1.2-3.0), injecting drug use (IDU) (aOR:2.2, 95%CI:1.3-3.9) and no prior PrEP use (aOR:1.8, 95%CI:1.2-2.7). Collecting two prescriptions only was associated with being aged  $<25$  years (aOR:2.3, 95%CI:1.5-3.6) and no prior PrEP use (aOR1.9, 95%CI1.3-2.9). The median time between dispensing was 104 and 89 days ( $p<0.01$ ) among participants with two or  $\geq 3$  dispenses, respectively.

## Conclusion:

PrEPX participants who did not remain in the study were younger, more likely to report injecting drug use and delayed collecting a second prescription. These findings provide important information to help identify people seeking PrEP who may require support to maintain PrEP use as Australia transitions to PrEP prescribing outside clinical trial settings.

**Disclosure of Interest Statement: See example below:**

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