



• It won't work

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- It wont help us end HIV
 - · ...and even if it did it would cost too much
- It will cause increased risk behaviour and a wave of STIs

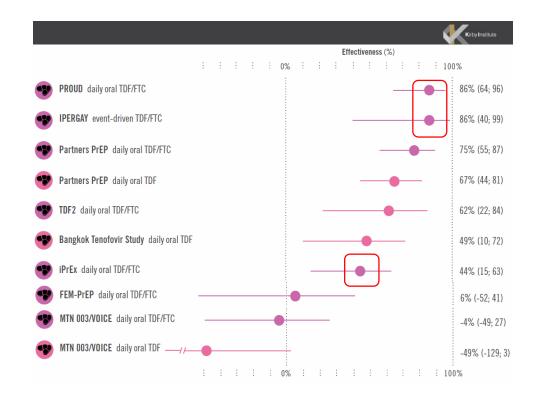


PrEP's individual level efficacy

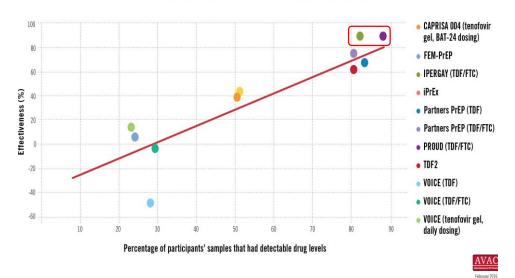


"If something comes along that's better than condoms, I'm all for it, but Truvada is not that," said Michael Weinstein, president of the AIDS Healthcare Foundation. "Let's be honest: It's a party drug."





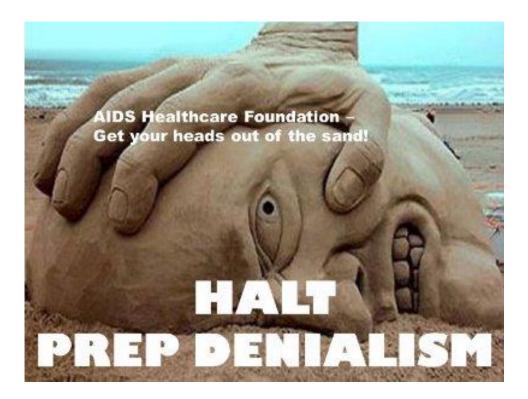
PrEP Works if You Take It — Effectiveness and Adherence in Trials of Oral and Topical Tenofovir-Based Prevention





PrEP efficacy: summary

- Oral TDF/FTC PrEP is extremely effective in adherent individuals
- · Oral TDF/FTC PrEP works best in the rectum
 - The regimen is forgiving for missing up to 3 pills/week
 - However, daily adherence is required for vaginal protection
- Daily TDF/FTC PrEP is close to 100% effective in adherent gay men
 - Case reports of failure in adherent individuals are rare (approx. 5)
 - Drug resistant HIV exaplains most of these





Does PrEP help reduce HIV at the population level?



What if you're wrong about PrEP?

AHF believes that while Truvada may work to protect a small segment of the population of HIV-negative individuals, all of the scientific studies have shown that <u>it will not work on a community-wide basis</u> because of <u>consistently bad adherence by study subjects</u>—even under ideal circumstances.

Both the community and the government must be accountable for the guidance they give to vulnerable populations. The debate about safer sex goes back to the beginning of the epidemic and every time we didn't heed advice to protect ourselves, we paid a terrible price. AHF will do everything possible to make sure that doesn't happen again, but if we are wrong we will take responsibility for our decisions. We hope everyone else will do the same.





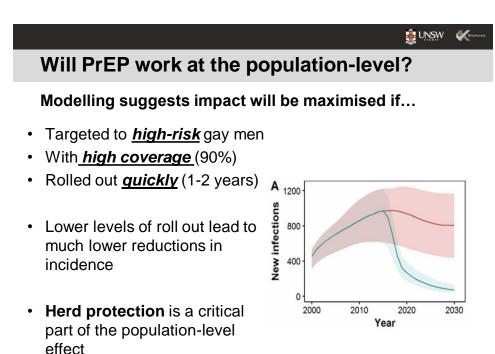
S COFFEE HOUSE MAGAZINE WRITERS BOOKS & ARTS PODCASTS HEALTH LIFE MONEY MORE How the HIV-prevention drug could break the NHS Ross Clark



NHS refusal to fund HIV prevention treatment is shameful, say charities

PrEP, which can reduce risk of HIV infection by up to 86%, falls outside health service remit, says NHS England





Slide courtesy of Richard Gray

Population-level effectiveness of rapid, targeted, high-coverage roll-out of HIV pre-exposure prophylaxis in men who have sex with men: the EPIC-NSW prospective cohort study



• Rapid

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- 3,700 gay and bisexual men started PrEP in 8 months, almost 10,000 in 2 years
- Targeted
 - high risk criteria, based on local data
 - State-wide across NSW
- High-coverage
 - Aimed for 100% coverage of high-risk men
 - No upper limit on recruitment

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EPIC-NSW results

32% decline in new HIV infections diagnoses state-wide within 12 months of full recruitment

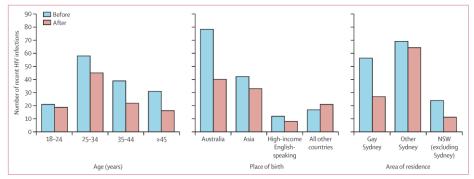


Figure 2: Number of recent HIV infections in New South Wales

	L	ancet HIV 2018
15		Published Online October 17, 2018



PrEP: NHS 'must urgently offer' HIV breakthrough nationwide as study shows infections cut 25% in a year

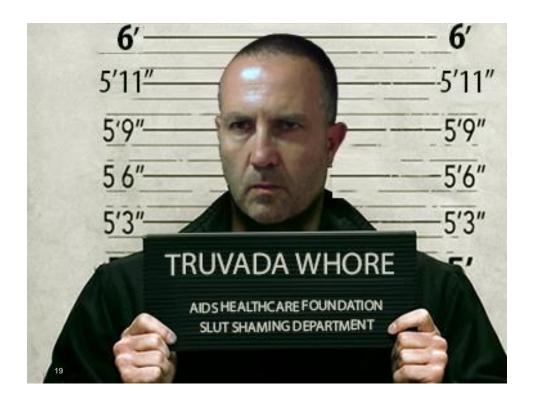
'Unacceptable' that PrEP provision in England is capped when there are no limits in other UK nations, National Aids Trust chief says



Risk compensation



Increasing condomless sex

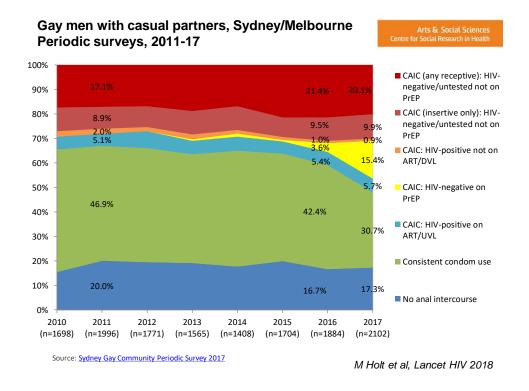


The New York Times

The End of Safe Gay Sex?

By Patrick William Kelly June 26, 2018



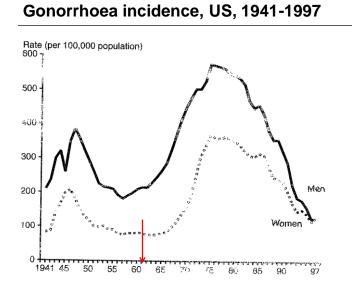


Increasing condomless sex

- Condomless sex increases in men taking PrEP
- There is no increased HIV transmission in adherent men
 - Potential for increased HIV if men who are not taking PrEP also increase condomless sex
- Frequent STI testing is critical to contain the increased STI risk
- Additional interventions are required for STIs







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