

Press Release

For immediate release: March 6, 2018

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March 6, 2018 – A new CDC analysis suggests only a small percentage of Americans who could benefit from pre-exposure prophylaxis (PrEP) have been prescribed it.

A new CDC analysis suggests that only a small percentage of Americans who could benefit from pre-exposure prophylaxis (PrEP), a daily pill for HIV prevention, have been prescribed it. In the first detailed analysis by race and by risk group, CDC researchers also found that while two-thirds of people who could potentially benefit from PrEP are African-American or Latino, they account for the smallest percentage of prescriptions to date.

The findings were presented today at the annual Conference on Retroviruses and Opportunistic Infections in Boston by Dawn K. Smith, MD, MPH, MS, epidemiologist and medical officer in CDC's Division of HIV/AIDS Prevention. Dr. Smith presented the new CDC estimates of PrEP needs and an examination of available data on PrEP prescriptions from a national database of prescriptions filled by commercial pharmacies in the United States.

Results indicate that, in 2015, approximately 500,000 African-Americans and nearly 300,000 Latinos across the nation could have potentially benefited from PrEP based on CDC clinical guidelines. However, only 7,000 prescriptions were filled at retail pharmacies or mail order services for African-Americans and only 7,600 for Latinos during a similar time period (September 2015 — August 2016). While racial and ethnic data were not available for one-third of the prescription data, the analysis found a substantial unmet prevention need.

The gap between how many people could potentially benefit from PrEP and how many received it was smaller among whites, yet still considerable. Of approximately 300,000 whites who could potentially have benefited from PrEP, only 42,000 prescriptions were filled at retail pharmacies or mail order services.

“One of our most powerful tools for HIV prevention remains largely on pharmacy shelves,” said Jonathan Mermin, MD, MPH, director of CDC's National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. “PrEP can be a potent prescription that strengthens prevention options for people who are at high risk for HIV infection.”

Study underscores need to get PrEP to more who could potentially benefit

The Food and Drug Administration approved PrEP for HIV prevention in 2012. When taken daily as directed, PrEP can reduce the risk of sexually acquiring HIV by more than 90 percent and the risk of HIV infection among people who inject drugs by more than 70 percent.

To help direct provider and public education efforts, CDC researchers developed a new method for estimating where PrEP need is greatest. The analysis combines data on risk behavior with the latest information on HIV diagnoses nationally and in states.

important role in a person's likelihood of infection," explained Smith. "We now have a powerful picture of where PrEP's potential impact could be greatest."

The new national estimate is that about 1.1 million Americans overall are at substantial risk for HIV and should be offered PrEP. However, only 90,000 PrEP prescriptions were filled in commercial pharmacies in the year examined.

Actual PrEP use is somewhat higher than these estimates, because some Americans obtain PrEP through demonstration projects or non-commercial pharmacies, including military health plans, or managed care consortia that operate their own prescription drug programs. Previous studies suggest that commercial pharmacies account for roughly 85 percent to 90 percent of all PrEP prescriptions.

CDC working to expand PrEP awareness and access

CDC is presenting the new data on PrEP need and uptake as part of ongoing efforts to maximize PrEP and all available prevention strategies.

"Closing gaps is an important step for PrEP," said Eugene McCray, MD, director of CDC's Division of HIV/AIDS Prevention. "CDC is committed to equipping providers and all people living with and at risk for HIV with the information and support needed to maximize the impact of PrEP and all proven strategies."

CDC is leading efforts to build awareness about PrEP and help ensure that it is available to everyone who could potentially benefit from it. For example:

- In January, CDC renewed its HIV prevention and surveillance funding program for state and local health departments. In addition to prioritizing efforts to reach all people who are living with HIV with effective prevention and treatment options, the new program also prioritizes efforts to expand access to PrEP for HIV-negative individuals at substantial high risk, including people of color. CDC has also provided targeted funding to help health departments and community-based organizations expand PrEP access for all people at risk, including people of color.
- To inform and educate health care providers about PrEP, CDC recently issued updated clinical guidelines and has developed step-by-step checklists and interview guides for clinical use. CDC is also supporting a telephone hotline that provides free expert clinical advice on PrEP and sponsoring online clinical training (CME).
- CDC is supporting implementation research to further examine the practical requirements, costs, and impact of PrEP.
- Scientists at CDC are conducting studies to evaluate the next generation of PrEP options, including long-acting PrEP that could be taken less frequently.
- While PrEP can fill a critical gap in America's prevention efforts, all available HIV prevention strategies must be used to have the greatest impact on the epidemic. These include treatment to suppress the virus among people living with HIV; correct and consistent use of condoms; reducing risk behaviors; and ensuring people who inject drugs have access to comprehensive prevention services that support drug treatment, HIV testing and linkage to care, and sterile syringes and

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