LATEST UPDATES ON THE HIV RESPONSE IN THE SOUTHEAST ASIA AND THE PACIFIC REGIONS

Webinar series

08 July 2019
Title Day X
Subtitle

Recent regional updates on PrEP and PEP
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WHO & UNAIDS Asia-Pacific
Outline

• What is PrEP (& PEP)?
• Why do we need PrEP in the Asia-Pacific?
• What is the current situation?
What is Pre-exposure prophylaxis (PrEP)?

PrEP is

- the use of **ARVs**
- by people who are **HIV negative**
- **before** exposure to HIV
- to prevent HIV infection

PrEP is recommended by WHO in 2015 as:

- an **additional** prevention choice for people at **substantial risk** of HIV infection as part of **combination HIV prevention** approaches

PrEP is highly effective
PrEP is not PEP

- Post exposure prophylaxis is ARVs taken after exposure to HIV
- PEP is commonly available in the Asia-Pacific region for occupational exposures
- Limited availability for non-occupational exposures (nPEP)
- Another option in the range of HIV prevention options available
Snapshot on the HIV epidemic in Asia and the Pacific

Percent change in new HIV infections between 2010 and 2018

No change: -33%, -27%, -31%, 4%, 57%, 203%
Change: -59%, -64%

Share of new HIV infections by population in Asia and the Pacific

- 84% of new HIV infections among key populations and their partners
- 16% of sex workers
- 4% of people who inject drugs
- 14% of men who have sex with men
- 29% of transgender
- 35% of clients of sex workers and partners of key populations
- Rest of population: 2%

Note: Afghanistan, Bangladesh, Fiji and PNG are also seeing increasing new HIV infection trends between 2010 and 2017

Source: Prepared by www.aidsdatahub.org based on 2019 HIV Estimates (from countries submitted preliminary spectrum files)
### Key Populations Prevention Gap

#### Asia and the Pacific

**Female sex workers**
- Population size: 4.6 M
- Condom use at last sex: 83%
- HIV testing coverage: 42%
- Needles and syringes: (…)

**Men who have sex with men**
- Population size: 11.7 M
- Condom use at last sex: 65%
- HIV testing coverage: 54%
- Needles and syringes: (…)

**People who inject drugs**
- Population size: 4.1 M
- Condom use at last sex: 32%
- HIV testing coverage: 44%
- Needles and syringes: 125

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**Getting to zero**

Australia:
PrEP trials enrolled >17,000 people.
PrEP is now included under the national health program

New Zealand:
PrEP is included under the national health program
HIV diagnoses in MSM in NSW, Australia began to drop after PrEP was introduced.

- Scale-up of HIV testing and treatment, and maintaining condom use and harm reduction (achieved 90-90-90)
  - No decrease in HIV diagnoses
- EPIC-NSW rapidly enrolled about 9700 participants: March 2016 – April 2018
- Within 12 months of the first 3700 participants being enrolled:
  - 25% relative risk reduction among MSM
  - 32% RRR in recent infections among MSM
HIV diagnoses, by quarter and exposure category

Source: National HIV notifications Q1 2014 – Q4 2018, The Kirby Institute, UNSW Sydney
Thailand: Successful KP-led programs; PrEP approved for inclusion under UHC
Princess PrEP: PrEP dispensed by KP lay providers in Thailand

PrEP Dispensing to KPs by KP Lay Providers

KP-LED HEALTH SERVICES

- ONLINE OR OFFLINE, TO PROVIDE HIV EDUCATION, PROMOTIONAL MATERIALS, CONDOMS, AND LUBRICANTS
- PROVIDE HIV TESTING AND COUNSELING BY KP LAY PROVIDERS
- REFER TO COMMUNITY HEALTH CENTERS AND PROVIDE REGISTRATION SUPPORT
- ART DISPENSING ACCORDING TO DIFFERENTIATED SERVICE DELIVERY MODEL AND CONDOM & LUBRICANT PROVISION
- ENSURE TREATMENT ADHERENCE
- ENCOURAGE HIV-NEGATIVE CLIENTS TO CONTINUE TESTING REGULARLY

Prevent

PreP/PEP DISPENSING AND CONDOM & LUBRICANT PROVISION

REACH
RECRUIT
TEST
RETAIN

ROLES OF KP LAY PROVIDERS IN PrEP DISPENSING

1. Assess risk and provide PrEP counseling
2. Perform HIV testing and send samples for creatinine and HbsAg
3. Dispense PrEP to HIV-negative client to start on that day, based on doctor’s standing order
4. In consultation with the doctor, call to inform the clients of lab results a few days later
5. Provide PrEP follow-up visits

55% of Thai PrEP users received PrEP from KP lay providers

Vietnam:
PrEP for PrEP: Cumulative enrollment
March 2017 – May 2019

Source: Kimberly Green, PATH, Vietnam, June 2019
PrEP continuation at month 3

- MSM: 90%
- TGW: 80%
- Discordant couples: 70%
- Total: 100%
Results

- High percentage of eligible clients enrolled to use PrEP and remained with the project at 9 months showing high acceptability, tolerability, and retention.
- 61 clients dropped out by 9 months due to no longer having risk behaviors, changing residence, side effects, medical conditions or were lost to follow-up.
- No cases of HIV sero-conversion after 12 months: PrEP is effective in terms of HIV prevention and no substantial alteration of condom use was observed.

VinaPrEP: enrollment and retention cascade*

<table>
<thead>
<tr>
<th></th>
<th>Number of Clients</th>
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<tr>
<td>screened</td>
<td>231</td>
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<tr>
<td>eligible (behavior)</td>
<td>223</td>
</tr>
<tr>
<td>eligible (clinical)</td>
<td>202</td>
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<tr>
<td>enrolled in PrEP (M0)</td>
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<td>2nd visit (M1)</td>
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<td>3rd visit (M3)</td>
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<tr>
<td>4th visit (M6)</td>
<td>156</td>
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<tr>
<td>5th visit (M9)</td>
<td>140</td>
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</tbody>
</table>

*At the closure of the project, 114 PrEP project clients came for the final visit at 12 month (M12) by the project reporting date, however as additional clients were expected to come back, this number is not considered final.

Source: VinaPrEP Factsheet, UNAIDS Vietnam; Data to Dec 2018
The Philippines: Successful pilot: Project PrEPPY; private sector access
3,400+ people interested to take PrEP
(as of December 2017)

Screening

Inclusion criteria:
(any of the following in the past 6 months)
- unprotected anal or neovaginal sex
- one or more STIs
- exchanged sex for money, goods, or favors
- used drugs for sexual pleasure

Based on exclusion criteria:
- HIV reactive (or symptoms of AIDS)
- HBeAg (or symptoms of acute or chronic Hep B infection)
- Creatinine clearance (GFR) <15 mL/min
- Clinical symptoms of lactic acidosis or hepatic encephalopathy
- Currently taking a pregnancy agent

- Total number of participants marked ineligible: 90
- Total number of participants screened: 340
- Total number of participants enrolled: 250
Source: PrEP Pilipinas, LoveYourself, The Philippines
Malaysia: MyPrEP & PrEP study for transgender women

Pakistan: Demonstration project and revised guidelines under development for launch in 2019

India: Successful trial among FSW completed; additional PrEP activities starting

Nepal: PrEP demonstration project completed

Myanmar: National PrEP consultation in April 2019; demonstration project under development

China: Demonstration project to begin at 2 sites in 2019: Phnom Penh & Siem Reap

Sri Lanka: Demonstration project to begin at 2 sites in 2019: Phnom Penh & Siem Reap

Nepal: PrEP demonstration project completed

India: Successful trial among FSW completed; additional PrEP activities starting
PrEP Initiations by Country, April 2019

Higher PrEP uptake in the Asia-Pacific is needed

UNAIDS/WHO target for 3 million people to commence PrEP by 2020

Current PrEP access & uptake is not sufficient to affect the course of the epidemic

Based on AVAC Global PrEP tracker, Q1 2019
You are a key element to PrEP success!

Faster, bigger scale-up of PrEP is needed across the region

- We don’t need more trials, we need access – PrEP works!
- People want & need PrEP as an additional prevention choice
- People are using PrEP informally

Successful PrEP implementation includes:

- meaningful community involvement
  - co-creation
  - mobilisation
  - KP-led services
- Partnership between stakeholders with allies and advocates
- Courageous and open-minded healthcare professionals and policy-makers
- High level commitment to scale-up and sustainability
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