Adherence 3 months after PrEP initiation among young African women in HPTN 082


BACKGROUND & RATIONALE
• Young women in sub-Saharan Africa are an important population who could benefit from PrEP, but who have been historically excluded from PrEP trials.
• Studies in other populations have highlighted the importance of adherence, but research in young women associated with PrEP uptake and interventions to support adherence is needed.
• HPTN 082 (the FEM-PrEP study) was an open label PrEP study in Cape Town and Johannesburg, South Africa and Harare, Zimbabwe with the primary objective to: Assess the proportion and characteristics of young HIV-uninfected women who accept versus decline PrEP
• Assess adherence to PrEP in young women randomized to: • Standard care adherence support (2x weekly, counseling using cognitive behavioral approach, and adherence club for peer support) • Enhanced adherence support (above plus drug level feedback at months 2 and 3)

METHODS
STUDY DESIGN
• Demographically similar to negative women ages 16-25 were soliciting using the VOICE risk score and a PrEP readiness scale.
• Women interested in PrEP were enrolled regardless of initial decision to initiate PrEP (PrEP/ Placebo) categories were offered if PrEP or subsequent follow up visit.
• Follow-up visits were at 1, 2, 3, 6, 9 and 12 months.
• Adherence at 3 months was assessed by tenofovir diphosphate (TFV-DP) levels at month 3
• The median VOICE risk score was 7 (>5 associated with >6% HIV incidence in prior cohorts).

RESULTS
PREVENTION OF HIGH ADHERENCE, BASED ON DRUG LEVELS AT 3 MONTHS

PREDICTORS OF HIGH ADHERENCE, BASED ON DRUG LEVELS AT 3 MONTHS

Table 1. UNIVARIATE AND MULTIVARIATE PREDICTORS OF HIGH TFV-DP (≥700 fmol/punch) vs LOW (<700 fmol/punch) DRUG LEVELS AT 3 MONTHS

Conclusions
• HPTN 082 enrolled a cohort of at-risk young women from Harare (Zimbabwe), Johannesburg and Cape Town (South Africa)
• Women were at average of 23 years old, a majority of at-risk partner and almost half had a partner who was 5 years older or more
• Anal sex, transactional sex, intimate partner violence and depression were common
• 96% of young women who enrolled in HPTN 082 initiated PrEP
• Table 3 showed at least one PrEP adherence support club in the first 3 months
• The majority used PrEP at 3 months; 96% had detectable intracellular TFV-DP levels at 365 days
• Median TFV-DP levels at month 3 were 485 fmol/punch
• Ethics review

EFFECTS OF DRUG LEVEL FEEDBACK ON ADHERENCE
• There were no differences among women who did and did not receive drug level feedback in the proportions with detectable TFV-DP at high adherence by (P=0.303, 95% CI 0.28-0.5)

ADHERENCE CLUB PARTICIPATION
• Among the 381 with a 3 month visit, 70% reported they had attended at least 1 adherence club (n=269, median club attendance of 2 in the first 3 months)

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