The PREP Cascade at NYC Sexual Health Clinics: Navigation is the Key to Uptake

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The findings and conclusions in this report are those of the authors and do not necessarily represent CDC's position

Background

- New York City's public Sexual Health Clinics (SHC) reach many people at high risk for HIV acquisition.
- SHC staff provide on-site PrEP navigation to HIV-negative patients who meet program-specific PrEP criteria, and ensure linkage to ongoing PrEP care at referral facilities.
- We sought to understand intervention uptake and related patient-level factors, which are critical to improving the PrEP cascade.

Methods

- We analyzed medical record data for 9,948 HIV-negative men who have sex with men (MSM) with SHC visits between April and September 2017.
- We de-duplicated data to the 1st visit at which MSM patients were identified as belonging to a priority group for PrEP navigation, and assigned MSM according to the following hierarchical groups:
  1) HIV post-exposure (PEP) use in the year prior to SHC visit
  2) Sexually transmitted infections (STI) diagnoses in the year prior to SHC visit; STI = syphilis, rectal chlamydia, or rectal gonorrhea
  3) Higher-risk (HR) partners in the year prior to SHC visit; HR partners = HIV-positive sex partners, HIV-positive needle-sharing partners, transactional sex partners
  4) Interest in speaking to someone about PrEP
- We constructed PrEP cascades for MSM meeting PrEP priority criteria, overall and by priority group.
- We used multivariable regression to identify patient factors (priority group, race/ethnicity, age, insurance status) associated with:
  1) Acceptance of PrEP navigation and referral
  2) Linkage to PrEP provider within ≤60 days of PrEP referral
  3) PrEP prescription at a referral provider

Results

Of 9,948 MSM, 2,925 (29%) met PrEP priority criteria

Figure 1. PrEP priority groups

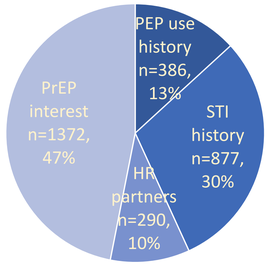
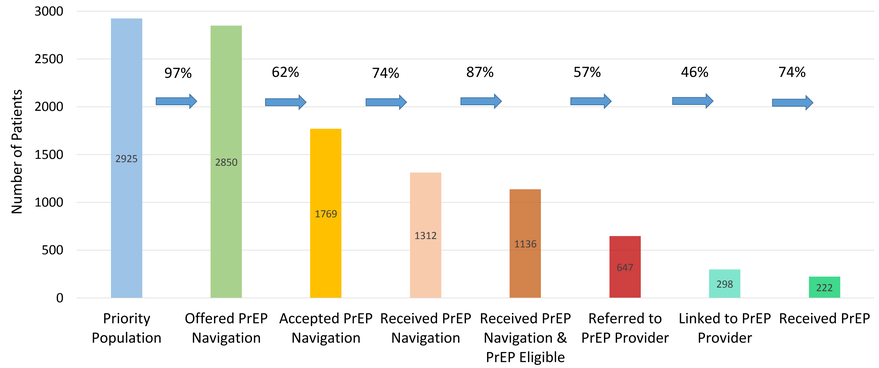
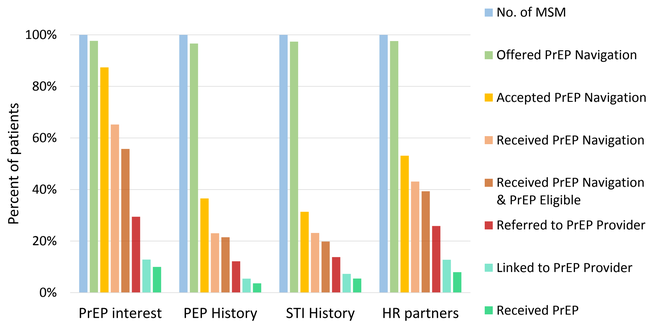


Figure 2. PrEP cascade among all MSM in PrEP priority groups (Arrows indicate percent retained for each step pf the cascade)



Overall, 222/647 (34%) of referred MSM patients received PrEP prescriptions

Figure 3. PrEP cascade by priority group



Correlates of PrEP navigation, referral, linkage, and prescription

	N	Accept Navigation (Among Offered)	Referred to PrEP Provider (Among Navigated)	Linked to PrEP Provider (Among Referred)	Prescribed PrEP (Among Linked)
Priority Group		aOR (95% CI)	aOR (95% CI)	aOR (95% CI)	aOR (95% CI)
PEP history	386	**0.07 (0.06, 0.10)***	1.20 (0.76, 1.91)	0.99 (0.53, 1.85)	0.72 (0.52, 2.07)
STI history	877	**0.06 (0.04, 0.07)***	**1.98 (1.39, 2.83)***	**1.54 (1.01, 2.33)***	0.79 (0.40, 1.56)
Higher Risk Partner	290	**0.15 (0.11, 0.20)***	**1.65 (1.09, 2.50)***	1.23 (0.74, 2.05)	**0.45 (0.21, 0.97)***
Interested/Other	1372	REF	REF	REF	REF
Race/Ethnicity					
Hispanic	880	**1.53 (1.21, 1.92)***	1.02 (0.76, 1.39)	0.66 (0.44, 0.98)	0.68 (0.34, 1.37)
NH-Black	642	**1.38 (1.08, 1.77)***	0.95 (0.68, 1.33)	0.93 (0.60, 1.45)	0.87 (0.41, 1.84)
NH-White	1005	REF	REF	REF	REF
NH-Other	398	**1.59 (1.18, 2.15)***	0.73 (0.49, 1.07)	1.13 (0.66, 1.93)	0.54 (0.23, 1.28)
Age Group					
≤24	712	REF	REF	REF	REF
25-29	960	0.83 (0.65, 1.06)	0.97 (0.71, 1.32)	1.40 (0.92, 2.12)	0.54 (0.24, 1.20)
30-34	593	**0.73 (0.55, 0.96)***	1.06 (0.74, 1.52)	**1.66 (1.03, 2.68)***	0.66 (0.27, 1.60)
35+	660	**0.59 (0.45, 0.77)***	1.09 (0.76, 1.56)	**1.72 (1.07, 2.78)***	0.49 (0.21, 1.15)
Insurance Status					
Insured	783	REF	REF	REF	REF
Uninsured	1762	1.13 (0.91, 1.39)	0.90 (0.68, 1.19)	**0.65 (0.45, 0.94)***	1.16 (0.64, 2.12)
Refused/Unk/Missing	380	1.19 (0.87, 1.63)	**0.57 (0.38, 0.87)***	0.78 (0.42, 1.43)	0.61 (0.22, 1.65)

* p<.05

Conclusions

- Although key priority groups (e.g., MSM with STI) demonstrated low navigation uptake, navigation effectively resulted in improved referral; these MSM should be prioritized in screening and outreach activities.
- Clinics offering sexual health services are ideal PrEP implementation settings:
  - A large number of racial minority patients were reached, and they were more likely than others to accept PrEP navigation.
  - Overall, ~1/3 of MSM were found to benefit fully from PrEP services.

Poster #1007; Contact: Preeti Pathela, ppathela@health.nyc.gov