DC HEALTH
GOVERNMENT OF THE DISTRICT OF COLUMBIA

Turning Intent into Action: Assessing PrEP Uptake at a Public STI Clinic

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Kate Drezner, MPH[1], B.W. Furness, MD, MPH[1,2], Chantil Thomas, MA[1], Jason Beverley, MS, RN, FNP-BC[1], Adam Allston[1], PhD, MPH, MSW, Adam Visconti[1], MD, MPH
[1]DC Department of Health, Washington, DC, USA, [2]CDC, Atlanta, GA

BACKGROUND

- Consistently taking pre-exposure prophylaxis (PrEP) reduces the risk of acquiring HIV by almost 90%.
- 12,322 DC residents are currently living with HIV, representing 1.8% of the total population.
- Washington, DC has a high incidence of HIV.
  - 360 new cases in 2018
  - 71.1% Black | 9.2% Latino/a
- The DC Health and Wellness Center began prescribing PrEP in 2016 to start and maintain men who have sex with men (MSM) and transgender persons of color on PrEP at low or no cost to them.
- The purpose of the study was to assess differences between patients on PrEP <1 month and ≥1 month.

METHODS

- Demographics and reasons for starting PrEP were collected in REDCap at initiation.
- Eligible patients:
  - Received a starter pack of PrEP;
  - scheduled a follow-up visit; and
  - agreed to additional follow-ups every 3 months.
- REDCap data were merged with medical records to determine time on PrEP.
- Patients taking PrEP <1 month and ≥1 month were compared using chi-square analysis and multivariate logistic regression to explore the associations of race/ethnicity, age, gender identity, and insurance status with time on PrEP.

RESULTS

- From August 2016 - December 2018, 530 people were prescribed PrEP.
  - 81.7% were people of color (47.2% Black, 28.5% Latino/a, and 6.0% other)
  - 280 (52.8%) were still on PrEP at ≥1 month
  - 250 (47.2%) were on PrEP <1 month
- Likelihood of being on PrEP ≥1 month increased with age (AOR: 1.02, 95% CI 1.00-1.04).
- Race/ethnicity was not associated with time on PrEP.

At the DC Health and Wellness Center - a safety net, health department-run STI clinic:

Patients on PrEP ≥1 month were less likely to be transgender women (AOR: 0.089, 95% CI 0.019-0.41) or cisgender women (AOR: 0.21, 95% 0.095-0.46) compared to cisgender men.

Those with private (AOR: 0.52, 95% CI 0.33-0.81) or public insurance (AOR: 0.24, 95% CI 0.14-0.40) were less likely to still be on PrEP at ≥1 month compared to those with no insurance.

Figure 1. PrEP Rx at the DC Health and Wellness Center, 2016-2018

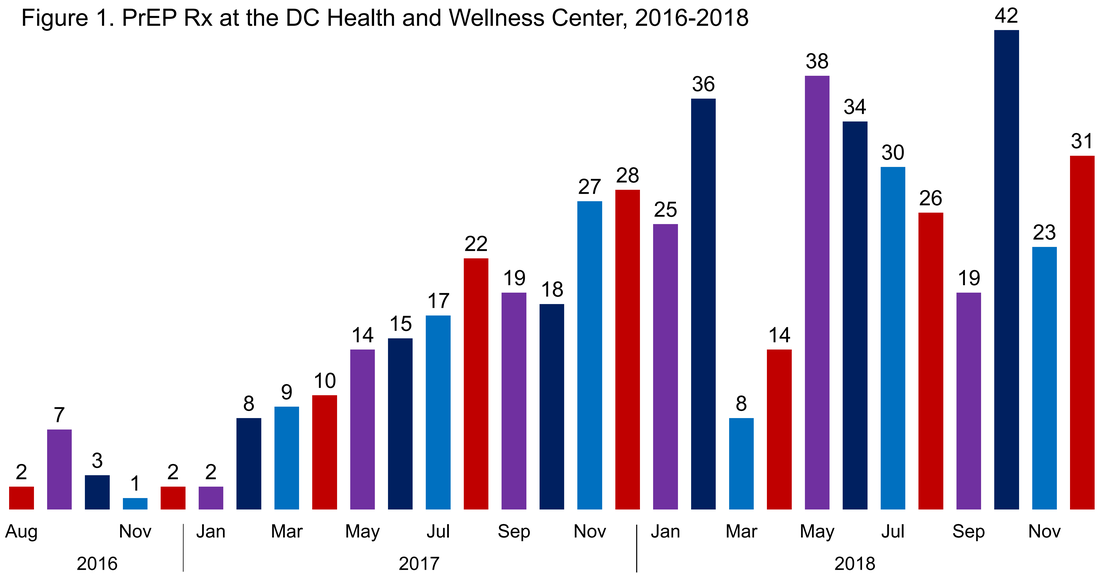
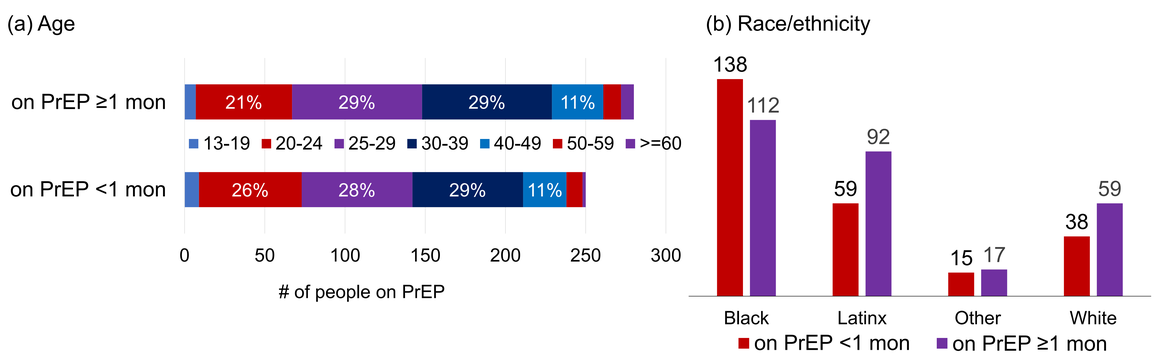
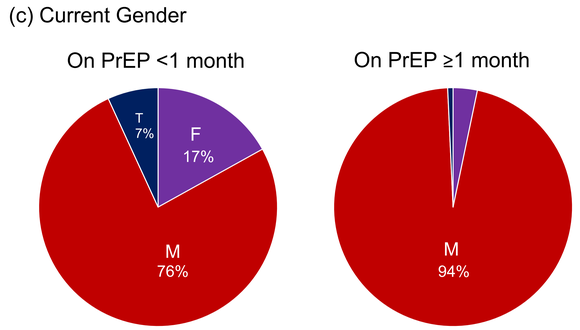


Figure 2. Age, current gender, and race/ethnicity – on PrEP <1 mon vs. ≥1 mon





CONCLUSIONS

- The DC Health and Wellness Center - a safety net, health department-run STI clinic – successfully provides PrEP to people of color – especially those underinsured or without insurance.
- Additional support may be needed for those with employer-mandated insurance and high co-pays.
- The clinic also needs to start collecting and assessing reasons for stopping PrEP, especially among cisgender and transgender women.
- The PrEP program has been successful in providing:
  - immediate, free PrEP via a starter pack at PrEP initiation.
  - PrEP to the focus population, men who have sex with men of color and transgender persons of color
- The clinic could benefit from a PrEP Case Manager to provide appointment reminders, follow up for missed appointments, and linkage to additional services (e.g., gender-affirming therapy). The addition of a PrEP Case Manager may improve uptake among youth and transgender persons.

ADDITIONAL KEY INFORMATION

Kate Drezner, MPH
Epidemiologist
District of Columbia Department of Health
Phone: 202-671-4806
Email: kate.drezner@dc.gov

The DC Health and Wellness Center
https://sexualbeing.org/dc-health-and-wellness-center/