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BACKGROUND

- To date, the HIV epidemic in Latin America remains concentrated in large urban centers and in vulnerable populations with MSM and transgender women (TGW) suffering the highest burden. Nevertheless, PrEP implementation in the region remains limited.
- ImPrEP is the largest PrEP implementation study in Latin America, with the goal of assessing the feasibility of same-day PrEP implementation to cis-MSM and TGW in the context of the Public Health Systems of Brazil, Mexico, and Peru.
- We are reporting results on HIV incidence, long-term PrEP engagement (LTPE) and its associated factors.

METHODS

- ImPrEP was a multicenter study conducted in Brazil (14 sites in 11 cities), Mexico (4 sites in 3 cities) and Peru (10 sites in 6 cities).
- Inclusion criteria were male assigned at birth, aged ≥18 years, HIV-negative at enrollment, and reporting at least one of the following criteria in the prior six months: condomless anal sex [CAS], CAS with partner(s) living with HIV, sexual transmitted infections (STI) signs and symptoms or diagnosis, or sex work.
- After enrollment, follow-up visits were scheduled at week 4 and quarterly thereafter, for a total of 5 planned follow-up visits within the initial 52 weeks of follow-up.
- Long-term PrEP engagement (LTPE) was defined as attendance to week 4 visit plus at least two quarterly visits within the initial 52 weeks of follow-up.
- Logistic regression was used to identify baseline factors associated to LTPE. Initially the effect of each variable was controlled by country and all statistically significant variables at 10% were included in the final adjusted model.
- HIV incidence rate was calculated per 100 person-years overall and stratified by country, gender and age.

RESULTS

- From March 2018 to June 2021, 9509 participants were enrolled, of whom 8279 participants (87.1%) completed 52-weeks of follow-up when the database was locked for this analysis (Brazil: 3877, Mexico: 2445, Peru: 1957).
- A total of 5783 (69.8%) showed long-term PrEP engagement, which was higher in Brazil (80.6%) than Mexico (67.8%) and Peru (51.3%).
- LTPE was lower among TGW, among participants younger than 35 years old and with lower level of education. Moreover, those participants reporting > 10 sexual partners, those who self-reported complete PrEP adherence at week 4 visit had higher change of LTPE. (Figure 1).
- The incidence rate was higher among participants from Peru, TGW and aged 18-24 years (Table 1).

CONCLUSIONS

- Although PrEP engagement and adherence were high, disparities among some populations may jeopardize the efficacy of PrEP programs.
- Despite PrEP, HIV incidence remained high among transgender women and younger individuals. Long-acting PrEP strategies may be useful for these more vulnerable populations.
- COVID-19 restrictive measures may partially explain the differences in LTPE across countries. Social and structural levels of HIV risk need to be addressed for full PrEP benefits realization.

Figure 1. Factors associated with long-term PrEP engagement.

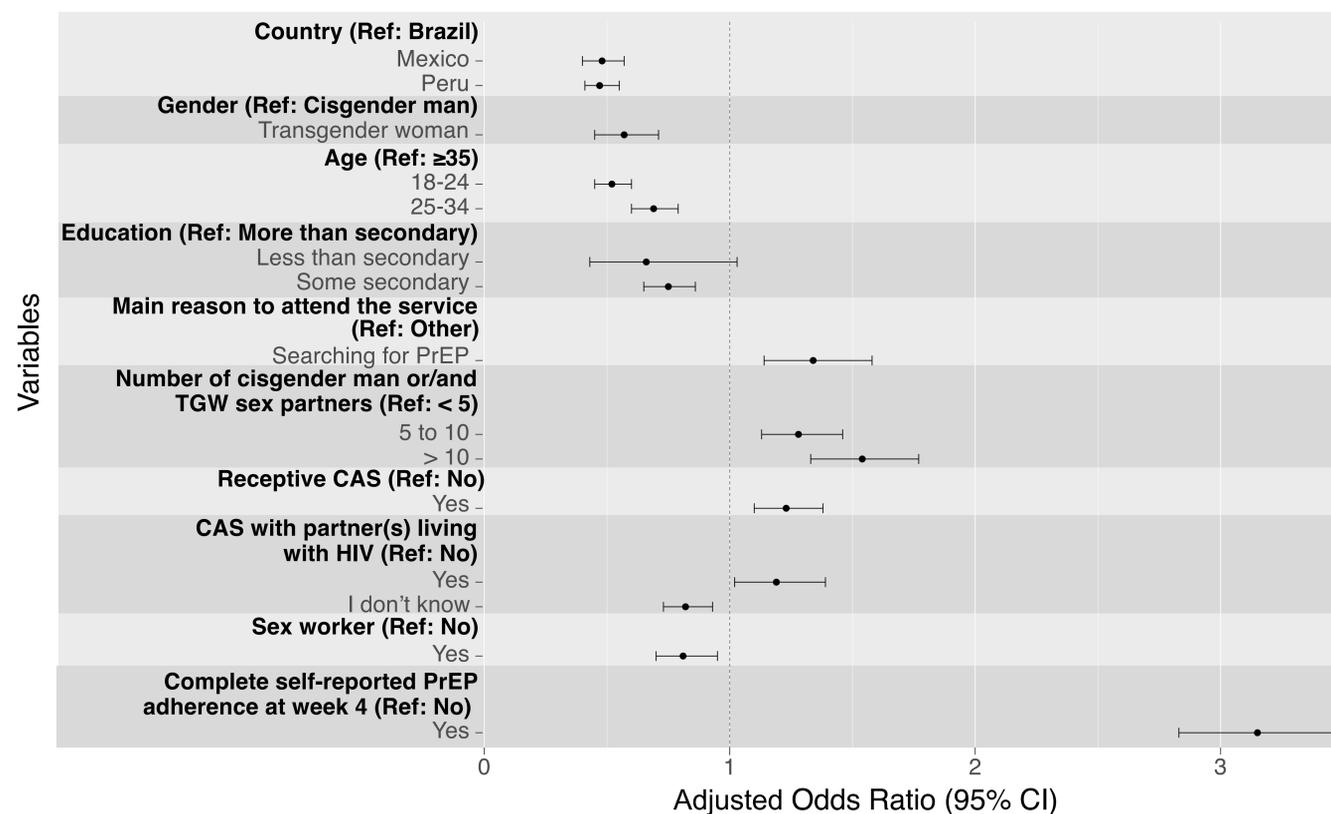


Table 1. HIV incidence overall stratified per country, gender and age

	HIV infection (N)	Person-years of follow-up	Incidence rate per 100 person-years (95%CI)
Overall	104	12,185.25	0.85 (0.70-1.03)
Country			
Brazil	24	6,577.81	0.36 (0.24-0.54)
Mexico	18	3,242.08	0.56 (0.35-0.88)
Peru	62	2,365.36	2.62 (2.04-3.36)
Gender			
Cisgender man	93	11,625.85	0.80 (0.65-0.98)
Transgender woman	11	559.41	1.97 (1.09-3.55)
Age (years)			
18-24	55	2,827.88	1.94 (1.49-2.53)
25-34	37	5771.88	0.64 (0.46-0.88)
≥35	12	3585.60	0.33 (0.19-0.59)

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