Acceptability and eligibility for PrEP among medical male circumcision clients

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Tendesayi Kufa-Chakezha,[1,2] *Ocean Tobaiwa,[3], Sean Patrick,[5] Khumbulani Moyo[4], Phil Dorrell,[3] Erushka Pillay,[3] Nicola Lutchman,[5] Adrian Puren[1,7]*

[1.]Centre for HIV and STIs, National Institute for Communicable Diseases, 1 Modderfontein Road, Sandringham; [2.] School of Public Health, University of the Witwatersrand, Johannesburg ; [3.] Clinton Health Access Initiative, Pretoria, South Africa ; [4.] Right to Care, Centurion, South Africa [5.] School of Health Systems and Public Health, University of Pretoria ; [6.] Gauteng Department of Health, [7.] Division of Virology, School of Pathology, University of the Witwatersrand

BACKGROUND

- The effectiveness of voluntary male medical circumcision services (VMMC) for HIV prevention has been limited by low uptake among males at highest risk of acquiring HIV
- Integration of VMMC with other HIV prevention interventions may increase access &/or uptake to combination HIV prevention among males.
- We describe pre-exposure prophylaxis (PrEP) acceptability and eligibility among adult males attending VMMC services in Gauteng Province, South Africa

METHODS

- Cross –sectional design
- Males ≥ 18 years attending VMMC services at six facilities in two districts of Gauteng Province were offered enrolment
- Eligible males completed informed consent procedures, interviewer- administered questionnaire and had rapid HIV testing
- Questionnaire had questions on demographic information, clinical history, sexual behavioural and risk assessments, PrEP knowledge, willingness to use PrEP (six item Likert scale each item rated 1- 5 corresponding to strongly disagree- strongly agree), willingness to pay for it and eligibility for PrEP based on national guidelines

RESULTS

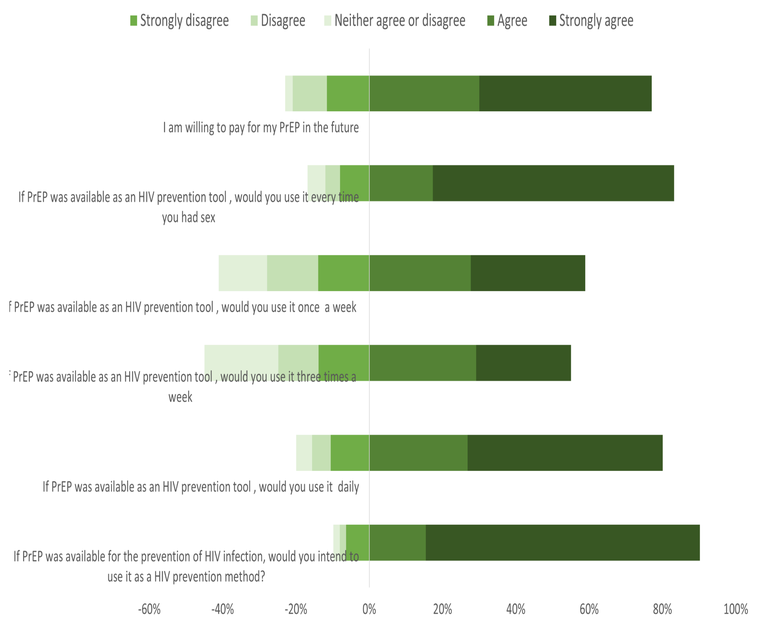
- 691 clients were enrolled and completed questionnaires
- Median age was 32 years (IQR 26- 39) , 570 (82.5%) were from Tshwane district and 248 (36.5%) were employed
- 2.7% reported never having sex before. For the sexually active the median age at first sex was 17 years (IQR 16-19 years)
- 22.6% reported sex with a non-regular sexual partner in the preceding 3 months while 18.1% reported having sex with two or more partners in the preceding 3 months.
- 46.3% had ever heard of PrEP
- 22.8% considered themselves at risk of HIV

Among males ≥18 years and attending VMMC services, there was: High acceptability of PrEP with 69% of HIV negatives willing to use it. Higher than expected eligibility to use based on national guidelines at 30% of enrolled

Willingness to use PrEP

- 590/ 691 were negative on rapid HIV testing
- 539/590 completed all six questions on the Likert scale (see Figure 1)
- Median total score was 26 (IQR 22- 27) out of a highest possible score of 30
- Assuming items rated 4 or 5 indicated willingness to use PrEP, 371 (68.8%) of individuals were willing to use PrEP
- PrEP scale had high internal consistency with a Cronbach alpha of 0.81
- The median amount those willing to pay was ZAR 50 (IQR ZAR 20-100).

Figure 1: Willingness to use PrEP among males attending VMMC services (n=539)



Eligibility for PrEP referral

Criterion	N	n (%)
Did the client report ≥2 multiple sexual partners in the past 3 months	374	65 (17.4)
Was the client treated for an STI in the past 12 months	451	15 (3.3)
Has the client requested PrEP (Does the client self-report being at high risk of HIV)*	572	112 (19.6)
Was the client syphilis positive	589	21 (3.6)
One or more of these criteria	590	178 (30.2)

CONCLUSIONS

- A large proportion of enrolled males attending VMMC services were not aware of PrEP but were willing to use with it.
- 30% were eligible based on current criteria.
- Integrating PrEP with VMMC services maybe feasible and should be explored.

ADDITIONAL INFORMATION

Author contact information : tendesayikc@nicd.ac.za

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