

Long-acting PrEP Preference Among Brazilian Sexual and Gender Minorities: Key Influencing Factors

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BACKGROUND

- Oral PrEP uptake remains limited in Latin America, even as new HIV diagnoses continue to rise, especially among sexual and gender minorities (SGM).¹
- Previous research has highlighted a preference for long-acting PrEP in the region.^{2,3} With the approval of long-acting injectable cabotegravir and recent results of lenacapravir for PrEP, understanding PrEP preferences is vital for integrating these technologies into national PrEP programs.
- This study aims to describe PrEP preferences and identify factors associated with a 6-month long-acting PrEP preference among Brazilian SGM.

METHODS

- National cross-sectional online survey among Brazilian SGM aged 18+ years, self-reporting HIV negative/unknown, recruited through advertisements on dating apps (Scruff and Grindr) and social media (Instagram and Facebook).
- Main outcome was assessed with the question: “Assuming all of the PrEP modalities below are equally effective, which one would be your favorite”, with possible answers: daily oral (d-PrEP), event-driven oral (ED-PrEP), injectable in gluteus at each 2 months (2-month-PrEP), injectable subcutaneous at each 6 months (6-month-PrEP), would not use PrEP.
- We used logistic regression models to evaluate factors associated with preferring 6-month-PrEP (yes/no).

Brazilian sexual and gender minorities show a **strong preference** for long-acting PrEP, underscoring the need for prolonged HIV protection. Urgent actions are required to increase knowledge of HIV prevention modalities and address LGBTQIAPN+phobia. **Priority should be given to implementation studies on the acceptability and uptake of lenacapravir in Brazil.**

Table. Factors Associated with Preference for 6-Month Long-Acting PrEP Among Brazilian Sexual and Gender Minorities, 2024 (N=6200).

	Preference for 6-month long-acting PrEP			aOR (95%CI)	p-value
	Yes N=3070	No N=3130	Total N=6200		
HIV knowledge score (score range 0-12)	11.1 (SD 1.2)	10.7 (SD 1.6)	10.9 (SD 1.5)	1.11 (1.06-1.16)	<0.001
Internalized LGBTQIAPN+phobia (score range 0-42)	10.2 (SD 8.5)	11.9 (SD 9.4)	11 (SD 9)	0.99 (0.98-1.00)	0.004
Ever used PrEP					<0.0001
No	1665 (54.2)	2280 (72.9)	3945 (63.6)	Ref.	
Yes	1405 (45.8)	848 (27.1)	2253 (36.4)	1.92 (1.67-2.21)	
Engaged in chemsex (past 6 months)					0.001
No	1487 (66.7)	1858 (77.5)	3345 (72.3)	Ref.	
Yes	741 (33.3)	540 (22.5)	1281 (27.7)	1.27 (1.10-1.47)	

Models adjusted by age, gender, race, schooling, income, condomless anal sex (past 6 months), STI (past 6 months)

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RESULTS

- From August-December 2024, 6,200 participants completed the questionnaire.
- Median age was 39 (IQR:32-47) years; 5688 (91.7%) cis-men, 176 (2.8%) non-binary persons, 43 (0.6%) trans-woman, 46 (0.7%) trans-men.
- 24.9% had secondary education or lower, 43.6% non-white, 22.4% low income (< 500USD/month);
- 64.8% reported condomless anal sex, 27.7% chemsex and 12.0% STI, all in the past 6 months;
- 8.2% never tested for HIV; 36.4% ever used PrEP
- Mean HIV knowledge score was high (10.9; SD1.5) and mean internalized LGBTQIAPN+phobia was low (11; SD9).
- Most preferred 6-month-PrEP (49.5%), followed by 2-month-PrEP (16.6%), d-PrEP (15.4%), ED-PrEP (14.7%), and 3.8% would never use PrEP.**
- Factors associated with preferring 6-month-PrEP included **higher HIV knowledge, lower internalized LGBTQIAPN+phobia, ever used PrEP and reporting chemsex** (Table).

CONCLUSIONS

- Our results reveal a strong preference for long-acting PrEP among Brazilian SGM, highlighting the demand for prolonged protection.
- Urgent efforts are needed to increase knowledge of HIV prevention and combat LGBTQIAPN+phobia.
- Priority should be given to implementation studies on the acceptability and uptake of lenacapravir in Brazil, especially among populations at increased vulnerability to HIV, such as those engaging in chemsex.