Preferences for long-acting HIV Pre-exposure Prophylaxis (PrEP) modalities amongst persons who use drugs, Vancouver, Canada.

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BACKGROUND

- People who use drugs (PWUD) remain disproportionally affected by HIV in Canada, making up 18% of new diagnoses in 2023[1].
- Despite its proven effectiveness, HIV pre-exposure prophylaxis (PrEP) uptake amongst PWUD is low – ranging 1-3% in the US [2].
- Long-acting PrEP modalities including LA-cabotegravir, and potentially lenacapavir may have significant advantages in populations where adherence to daily oral therapy may be limited.
  - Current data for acceptability of these modalities in PWUD is sparse [3,4].
- We evaluated PrEP awareness, and modality preferences among PWUD engaged in care in Vancouver's Downtown Eastside (DTES), an inner-city neighbourhood with a high prevalence of substance use.

METHODS

Design:

- We recruited individuals age 19 and older from 6 addictions and primary care clinics in DTES Vancouver.
- Recruitment occurred between November 2024 and June 2025.
- Participants completed a knowledge survey exploring awareness of PrEP, preferences for PrEP modality and potential barriers and facilitators of PrEP.

Study Procedures:

- We evaluated the proportions of those reporting recent (within 6 months drug use) and awareness and willingness to use PrEP, and preference for daily oral PrEP, 2-monthly (q2M), or 6-monthly (q6M) injectable PrEP.

Analysis:

- We performed multivariable logistic regression to assess for factors associated with Q6M preference, adjusted for age, gender, housing status, frequency of drug use, engagement in opioid substitution, sexual risk group, and history of prior sexually transmitted infection.

RESULTS

- Overall 359 individuals were recruited, n=293 reporting recent drug use (see Table 1).
- Awareness of PrEP was low (24%) while willingness to use PrEP was high, and was similar for q2M and q6M PrEP (see Figure 1).
- Factors associated with willingness to use PrEP and q6M PrEP are shown in Table 2.

PrEP awareness amongst PWUD was low, however a majority were willing to use PrEP, particularly long-acting agents.

Figure 1: PrEP Awareness and Preferences among People Who Use Drugs (%, 95% CI)

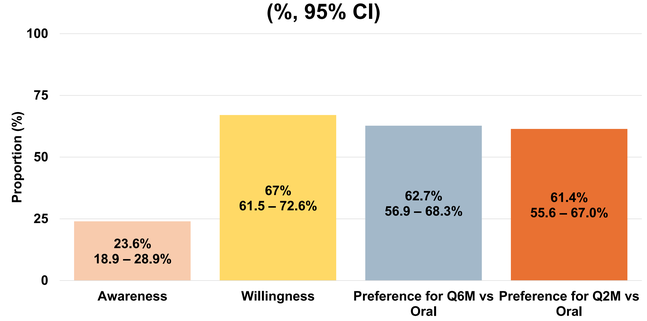


Table 1: Demographic characteristics of sample stratified by self-reported drug use in last 6 months.

	Yes (N=293)	No (N=66)	Overall (N=359)	p
Age (years)				
20-29	23 (7.8%)	2 (3.0%)	25 (7.0%)	<0.001
30-39	73 (24.9%)	12 (18.2%)	85 (23.7%)	
40-49	89 (30.4%)	9 (13.6%)	98 (27.3%)	
50-59	71 (24.2%)	21 (31.8%)	92 (25.6%)	
60+	37 (12.6%)	22 (33.3%)	59 (16.4%)	
Gender identity				
Cis Man	190 (64.8%)	43 (65.2%)	233 (64.9%)	0.976
Cis Woman	96 (32.8%)	23 (34.8%)	119 (33.1%)	
Trans Man	2 (0.7%)	0 (0%)	2 (0.6%)	
Trans Woman	1 (0.3%)	0 (0%)	1 (0.3%)	
Another identity	3 (1.0%)	0 (0%)	3 (0.8%)	
Prefer not to answer	1 (0.3%)	0 (0%)	1 (0.3%)	
Racial/Ethnic Identity				
Indigenous	100 (34.1%)	19 (28.8%)	119 (33.1%)	0.088
White	155 (52.9%)	31 (47.0%)	186 (51.8%)	
Other	38 (13.0%)	16 (24.2%)	54 (15.0%)	
Main income source (past month)				
Employment income	17 (5.8%)	6 (9.1%)	23 (6.4%)	0.546
Social support / Pension	261 (89.1%)	58 (87.9%)	319 (88.9%)	
Informal/criminalized/not working	15 (5.1%)	2 (3.0%)	17 (4.7%)	
Main Housing (past 6 months)				
House/apartment	87 (29.7%)	38 (57.6%)	125 (34.8%)	<0.001
SRO hotel	69 (23.5%)	15 (22.7%)	84 (23.4%)	
Other	137 (46.8%)	13 (19.7%)	150 (41.8%)	
Frequency of drug use				
None	18 (6.1%)	66 (100%)	84 (23.4%)	<0.001
Sometimes	40 (13.7%)	0 (0%)	40 (11.1%)	
Once per day	45 (15.4%)	0 (0%)	45 (12.5%)	
Multiple times per day	190 (64.8%)	0 (0%)	190 (52.9%)	
Engagement in opioid substitution (past month)	176 (60.1%)	23 (34.8%)	199 (55.4%)	
Sexual Risk Group				
Heterosexual	148 (50.5%)	21 (31.8%)	169 (47.1%)	0.0355
No partners	124 (42.3%)	40 (60.6%)	164 (45.7%)	
2SLGBTQ	7 (2.4%)	2 (3.0%)	9 (2.5%)	
Unknown	14 (4.8%)	3 (4.5%)	17 (4.7%)	
Any Prior STI				
No	83 (28.3%)	15 (22.7%)	98 (27.3%)	0.0525
Yes	70 (23.9%)	10 (15.2%)	80 (22.3%)	
No recent partners	124 (42.3%)	40 (60.6%)	164 (45.7%)	
Unknown	16 (5.5%)	1 (1.5%)	17 (4.7%)	
ARCH-IDU Result				
Not indicated	169 (57.7%)	0 (0%)	169 (47.1%)	<0.001
Not eligible	0 (0%)	66 (100%)	66 (18.4%)	
Indicated	124 (42.3%)	0 (0%)	124 (34.5%)	

Table 2: Correlates of PrEP Awareness, Willingness, and Modality Preference amongst PWUD.

Characteristic	Awareness of PrEP aOR[3] (95% CI)	Willingness to Use PrEP[1] aOR[3] (95% CI)	Preference for Q6M PrEP[2] aOR[3] (95% CI)
Age (decades)	0.81 (0.62, 1.05)	0.83 (0.65, 1.05)	
Age (years)			
20-29			—
30-39			2.45 (0.90, 7.04)
40-49			4.27 (1.60, 12.1)
50-59			5.39 (1.91, 16.2)
60-69			4.65 (1.39, 16.7)
70+			1.35 (0.20, 8.68)
Gender identity			
Man	—	—	—
Woman/other	0.74 (0.39, 1.36)	1.55 (0.87, 2.81)	1.06 (0.61, 1.86)
Main Housing (past 6 months)			
Stable	—	—	—
Unstable	1.29 (0.73, 2.30)	1.49 (0.87, 2.56)	1.76 (1.04, 3.00)
Frequency of drug use			
Daily or less	—	—	—
Multiple times per day	1.37 (0.73, 2.63)	1.35 (0.77, 2.35)	0.55 (0.31, 0.98)
Engagement in opioid substitution (past month)			
FALSE	—	—	—
TRUE	1.03 (0.58, 1.85)	1.08 (0.64, 1.84)	1.59 (0.95, 2.67)
Sexual Risk Group			
Heterosexual	—	—	—
No partners	0.60 (0.18, 2.18)	0.87 (0.24, 2.86)	1.57 (0.47, 5.19)
2SLGBTQ	2.03 (0.34, 10.5)	0.78 (0.15, 5.96)	1.29 (0.25, 7.75)
Unknown	1.27 (0.30, 4.52)	1.15 (0.33, 4.74)	1.12 (0.33, 4.09)
Any Prior STI			
No	—	—	—
Yes	1.36 (0.62, 3.01)	1.57 (0.72, 3.53)	1.13 (0.56, 2.31)
Unknown	2.31 (0.64, 7.82)	0.85 (0.26, 3.06)	0.62 (0.19, 2.05)

[1] "Yes" or "Maybe" versus "No" or "Don't know" [2] Versus daily oral PrEP or neither [3] aOR = Adjusted Odds Ratio, CI = Confidence Interval

CONCLUSIONS

- Overall prior PrEP awareness amongst PWUD engaged in care was low despite the existence of a public PrEP program for 6 years in British Columbia which includes indicators for use in PWUD.
- Willingness to use PrEP was high, with a significant preference for injectable agents compared to daily oral PrEP.
- Findings suggest that in order to maximize uptake, messaging about injectables should be tailored towards those with unstable housing while messaging about oral PrEP may resonate best with those with more frequent drug use.

References

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