# Increased clinician confidence and uptake of event-based PrEP by men who have sex with men during the COVID-19 pandemic

HIV pre-exposure prophylaxis (PrEP) can either be used daily or as an eventbased dosing (EBD) regimen by men who have sex with men (MSMs) having condomless anal sex to prevent HIV transmission; however, clinicians with expertise delivering daily PrEP often lack confidence delivering EBD-PrEP.<sup>1</sup> During the COVID-19 pandemic, MSMs appear to have tailored their sexual behaviour in line with local social restrictions, including the way they use PrEP.<sup>2</sup> We aimed to explore the proportion of MSMs using EBD-PrEP since the national rollout of PrEP in the UK (between October and December 2020) and clinician confidence delivering EBD-PrEP.

There were 551 MSMs seen who were eligible for PrEP in the study period, of which 448 were prescribed PrEP (64 declined, 2 stopped, 8 new patients and 29 repeat attenders accessed PrEP from another source). The median age of PrEP users was 37 years (IQR=29–48). Overall, 94/448 (21%, 95% CI 17% to 25%) of MSMs were using EBD–PrEP. New starters were significantly more likely to use EBD–PrEP compared with existing PrEP users (34% vs 13%,  $\chi^2$ =27.6, p<0.00001).

There was no significant difference in age between daily and EBD–PrEP users (37 years vs 41 years, p=0.2). There were 33/38 clinicians who responded to the survey. Clinicians were equally confident at delivering daily PrEP as EBD–PrEP (Likert scores=4.4/5 vs 4.2/5, p=0.2). However, barriers identified to providing EBD–PrEP by clinicians were; assessing which MSMs would be suitable for using EBD–PrEP, having access to appropriate information for patients to support their understanding of using EBD–PrEP, and clinician knowledge and belief in the efficacy of EBD-PrEP.

The uptake of EBD-PrEP has increased significantly since the COVID-19 pandemic and clinician confidence discussing EBD-PrEP is now equal to daily PrEP. It is surprising how many new MSM have attended since the national rollout, suggesting that provision of PrEP has encouraged MSM who were previously hidden to attend. These changes will optimise the effect of PrEP on HIV transmission.

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