

1523. Attitudes and Interest Toward HIV Pre-Exposure Prophylaxis Among Participants Using HIV Non-Occupational Post-Exposure Prophylaxis

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Background. Many persons who present for non-occupational post-exposure prophylaxis (NPEP) remain at increased risk for HIV acquisition because of recurrent practices. Limited data exist regarding facilitators and barriers to transitioning from non-occupational post-exposure prophylaxis (NPEP) to pre-exposure prophylaxis (PrEP) for ongoing HIV prevention in this population.

Methods. Participants enrolled in an observational study of co-formulated Tenofovir/Emtricitabine/Elvitegravir/Cobicistat for consensual NPEP were administered a survey to assess perceptions about and interest to use PrEP at day 14 (D14) and day 90 (D90) of an NPEP study at a large urban community health center between May, 2013 and March, 2014. Proportions were calculated for categorical variables. A Chi-square test or Fisher's exact test was used to measure differences in responses.

Results. Of the 33 participants that completed the D14 and D90 visits for the NPEP study, 87% participants completed the D14 and D90 surveys, all of whom were men. Their mean age was 34.6, and most were Caucasian (79.3%) and men who have sex with men (86.2%). Most (65.5%) had heard of PrEP as of D14. Among 23 who reported having a primary care provider, 34.8% did not feel comfortable talking to their provider about PrEP, the most common reason (62.5%) being that they did not feel comfortable discussing sexual practices with them. Respondents were more likely to report that they thought they could access PrEP via an STD clinic (75.9%; $p = 0.008$), an LGBT provider (86.2%; $p = 0.0008$), or an HIV provider (86.2%; $p = 0.0008$) than their primary care provider (41.4%). Most respondents (58.6%) expressed interest in starting PrEP at D14, which increased to 75.9% at D90 after completing NPEP ($p = 0.162$). Of those that completed the NPEP study thus far, 24.2% were referred to a PrEP program, accessing medication through a research study or a medical provider.

Conclusion. The majority of NPEP users reported a high interest in using PrEP, which tended to increase after completing their NPEP course. They perceived discomfort with discussing their sexual behavior with their PCP as a barrier to accessing PrEP compared to other clinical venues. Linkages should be strengthened between NPEP and PrEP programs.

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