

Study finds critical population adheres to PrEP with coordinated care

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New findings suggest that black men who have sex with men (BMSM) with access to a novel coordinated care program can adhere to pre-exposure prophylaxis (PrEP), a medication regimen that helps prevent HIV infection in uninfected individuals. Researchers reported their results today at a press conference at the Conference on Retroviruses and Opportunistic Infections (CROI) in Boston.

The study, known as HPTN 073, was conducted by the HIV Prevention Trials Network (HPTN) and funded by the National Institute of Allergy and Infectious Diseases (NIAID) and the National Institute on Drug Abuse, parts of the National Institutes of Health. Research sites in the District of Columbia; Los Angeles; and Chapel Hill, North Carolina, recruited 226 BMSM to participate.

After a screening to confirm an HIV-negative status, clinicians offered BMSM participation in a program called client-centered care coordination, or C4, as well as PrEP to self-administer daily in pill form. Nearly 80 percent of the trial participants agreed to take PrEP at the onset of the study. At its midpoint, approximately 70 percent of participants who first accepted PrEP had protective levels of the drug in their plasma. At the close of the 52-week study, 67 percent of participants reported that they were continuing to adhere to the daily regimen, although plasma data are not yet available to confirm these reports.

This research builds upon a [2012 study known as HPTN 061](#) that found

a disproportionately high incidence of HIV among gay and bisexual [black men](#) and supported the need for prevention programs specifically tailored to this at-risk population. That study found BMSM are likely to face psychological and social problems and encounter barriers to accessing care. The C4 intervention was designed to address some of these issues to increase the likelihood that participants would adhere to PrEP. In voluntary C4 sessions, a team of [health care professionals](#) provided counseling, care and referrals for client-identified problems, including substance use, homelessness, mental health and medical issues and [intimate partner violence](#).

Researchers intend to further analyze data to determine reasons BMSM gave for refusing or accepting PrEP, as well as correlations between plasma drug levels and number of C4 sessions attended.

More information: These findings were presented today at the 23rd Conference on Retroviruses and Opportunistic Infections at the John B. Hynes Veterans Memorial Convention Center in Boston.

Provided by NIH/National Institute of Allergy and Infectious Diseases

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