

# Prevention of HIV infection in men who have sex with men is a priority in West Africa

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In West Africa, men who have sex with men are exposed to a high risk of HIV infection and could benefit from stronger prevention including pre-exposure prophylaxis (PrEP). This is what is suggested by the first data from ANRS CohMSM, a study led by Christian Laurent (Institut de recherche pour le développement, unité TransVIHMI) and his colleagues, the first results of which will be presented at AIDS 2016 in Durban, South Africa (18 to 22 July).

Men who have sex with men (MSM) are a key population in the fight against HIV [infection](#), notably in African countries where homosexuality is subject to social rejection. Christian Laurent (Institut de recherche pour le développement, unité TransVIHMI) notes that "the prevalence of HIV infection is three times higher in African MSM than in the general population."

To limit infections, it seems necessary to put in place new prevention strategies for this at-risk population. However, data on African MSM are scarce. The first findings from the cohort study ANRS CohMSM led by Christian Laurent and his colleagues from ARCAD-SIDA (Bamako, Mali), Espace Confiance (Abidjan, Ivory Coast), Division SIDA/IST, Ministry of Health, Public Hygiene and Prevention (Dakar, Senegal), the Centre Muraz and REVS+ (Bobo-Dioulasso, Burkina Faso), Alternatives-Cameroun (Douala, Cameroon), Coalition Plus (Paris, France), and SESSTIM UMR 912 (Inserm/IRD/Université Aix-Marseille, France) give pointers to the incidence of HIV infection in MSM of four West African countries: Burkina Faso, Ivory Coast, Mali, and Senegal. The

results of this prospective study are presented in an oral communication at AIDS 2016 in Durban, South Africa (18 to 22 July).

This study recruited 386 seronegative MSM who had at least one sexual relation with another man in the three months preceding the study. Participants were offered 6-month follow-up involving an appointment every quarter for screening for HIV and other [sexually transmitted infections](#), plus advice on prevention, and provision of condoms. In the event of HIV infection, the volunteers could access suitable medical management including antiretroviral therapy.

During follow-up, 8 participants were infected by HIV, so the annual incidence rate was 4.8% (4.8 infected individuals out of 100 in one year). The authors note that "Considering the incidence of HIV infection observed in this study, MSM in these West African countries are eligible for PrEP, in line with WHO criteria." Since 2015, the WHO has recommended giving populations with a 3% annual incidence of infection access to PrEP including the antiretroviral tenofovir disoproxil fumarate, on top of conventional means of prevention.

Another striking result from this study is that 82% of the participants went to the first appointment, and 69% returned for the second and last. Christian Laurent considers that "these results confirm that there is a demand from these men for access to suitable follow-up and to screening. This is proof that they are fully aware of being exposed to a higher risk of infection."

To see whether a longer term follow-up program would be equally acceptable, the CohMSM study will continue for three years, under the aegis of ANRS and Expertise France.

Provided by ANRS

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