

Task force recommends PrEP for reducing risk for HIV acquisition

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The U.S. Preventive Services Task Force (USPSTF) recommends

preexposure prophylaxis (PrEP) for reducing the risk for HIV infection among individuals at increased risk for HIV acquisition. This recommendation forms the basis of a draft recommendation statement published online Dec. 13.

Roger Chou, M.D., from the Pacific Northwest Evidence-Based Practice Center at the Oregon Health & Science University in Portland, and colleagues conducted a [systematic review](#) on the effects of PrEP on the risk for HIV acquisition, mortality, harms, and other clinical outcomes. The researchers found that in 11 trials involving populations at higher risk for acquiring HIV infection, oral PrEP was associated with a [reduced risk](#) for HIV infection versus placebo or no PrEP (relative risk, 0.46).

The effects were consistent across HIV risk categories and for tenofovir disoproxil fumarate (TDF) plus emtricitabine or TDF alone. A strong association was seen between higher adherence and greater efficacy (relative risks, 0.27, 0.51, and 0.93, for adherence ≥ 70 percent, >40 to

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