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Title

Patterns of HIV pre-exposure prophylaxis use before and during the COVID-19 era in the Bronx, NY

Priority 1 (Research Category)

Infectious Diseases (not respiratory tract)

Presenters

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Abstract

Context: HIV pre-exposure prophylaxis (PrEP) is an antiretroviral medication recommended to individuals at high risk to prevent HIV acquisition. Disruptions in clinical care due to COVID-19 may have impacted access to and use of PrEP services.

Objective: To compare trends in continuity of PrEP use and related care before and during the COVID-19 era in the Bronx, a high HIV prevalence area severely impacted by COVID-19.

Study Design and Analysis: We analyzed data from a clinical cohort of patients prescribed PrEP from January 2019 to June 2021 to understand temporal trends (before versus during the COVID-19 pandemic) in PrEP use and related HIV and sexually transmitted infection (STI) testing.

Dataset: The Einstein-Rockefeller-CUNY Center for AIDS Research (ERC-CFAR) Clinical Cohort Database contains electronic health records (EHR) on patients living with HIV and confirmed HIV-negative patients in the Montefiore Health System, the largest HIV care provider in the Bronx, NY. The Bronx has the highest rate of new HIV diagnoses in New York City.

Population Studied: 1,318 patients were prescribed PrEP during the period (75% cisgender men, 22% cisgender women, 3% transgender women; 49% Hispanic, 29% non-Hispanic Black; median age 34 years).

Intervention: PrEP prescription, HIV/STI testing.

Outcome Measures: PrEP continuation (proportion of PrEP users prescribed PrEP in the previous quarter with prescription for refill); quality of care (proportion of PrEP users prescribed PrEP in the previous quarter who received HIV, gonorrhea, chlamydia, and/or syphilis testing); number of newly prescribed PrEP users per quarter.

Results: There was no change in continuation of PrEP use, with an average of 64% from the previous quarter obtaining a refill throughout the time period. There was a significant drop in HIV/STI testing at the beginning of the COVID-19 pandemic, which rebounded to pre-pandemic levels by the end of 2020. There was also a large drop in new PrEP users at the beginning of the COVID-19 pandemic, which has slowly increased since, but has not reached pre-pandemic levels.

Conclusions: COVID-19 resulted in fewer new PrEP prescriptions and disruption of clinic-based HIV/STI testing among PrEP users, but without a corresponding decrease in PrEP continuation among established users. Early implementation of telemedicine and home-based testing likely helped to maintain care standards despite pandemic-related challenges and should be expanded to ensure PrEP access.