

NEWS

CDC promotes pre-exposure prophylaxis for HIV prevention

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The US Centers for Disease Control and Prevention (CDC) has issued guidance for the **broad use of pre-exposure prophylaxis for HIV prevention**—better known by the shorthand PrEP—which builds on interim guidance issued in 2012.

Truvada is a single pill containing two commonly used HIV drugs, **tenofovir and emtricitabine**, and it is the only product that currently carries a label indication for PrEP, although studies of other drugs for PrEP are under way. When **taken daily** it provides **greater than 90% protection** against HIV infection.

The new guidance recommended PrEP as an option for four groups of people:

- Anyone in an ongoing sexual relationship with an HIV infected partner;
- Gay or bisexual men not in a mutually monogamous relationship who have had sex without a condom or have had a sexually transmitted infection diagnosed in the past six months;
- Heterosexual men or women not in a mutually monogamous relationship who do not always use condoms when having sex with partners known to be at risk for HIV (for example, injecting drug users or bisexual male partners of unknown HIV status); and
- Anyone who has in the past six months injected illicit drugs and shared equipment or has been in a treatment program for injection drug use.

The CDC estimated that 500 000 people fell into these risk categories. It said it believed that 1.1 million people in the United States were living with an HIV infection, about 15% of whom were not aware of their infection. New HIV infections continue to occur at a rate of 50 000 a year.

The guidance emphasized that PrEP involved **more than simply writing a prescription**. It recommended building an ongoing

relationship between doctor and patient to include **education**, risk reduction, and monitoring for adherence to and possible adverse events from the potent drugs.

“PrEP is a powerful tool that has the potential to alter the course of the US HIV epidemic today,” said Jonathan Mermin, the CDC’s director of HIV and sexually transmitted disease prevention. He explained that **PrEP was not a panacea but rather another tool that, when used properly, might help to reduce the number of new HIV infections in the US.**

A group of 66 leading HIV service organizations issued a joint statement praising the guidelines for providing “critical information to help healthcare providers and patients evaluate the suitability of oral PrEP as an HIV prevention” and for laying out the range of activities to successfully support that use.

“**The CDC PrEP guidelines underscore that PrEP is not for everyone,**” they said. “Neither the CDC nor any of our organizations are advocating for indiscriminate use of PrEP.” They added that it should not be seen as a replacement for condoms, but rather as an **additional option to be used with other methods of risk reduction and prevention.**

The guidance was announced in *Morbidity and Mortality Weekly Report* and included a 67 page guidance section¹ and a 43 page clinical providers’ supplement.²

1 Centers for Disease Control and Prevention. Pre-exposure prophylaxis for the prevention of HIV infection in the United States—2014: a clinical practice guideline. www.cdc.gov/hiv/pdf/guidelines/PrEPguidelines2014.pdf.

2 Centers for Disease Control and Prevention. Pre-exposure prophylaxis for the prevention of HIV infection in the United States—2014: clinical providers’ supplement. www.cdc.gov/hiv/pdf/guidelines/PrEPProviderSupplement2014.pdf.

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