

# Pre-exposure Prophylaxis (PrEP)

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## Information for patients

This information sheet answers some of the questions you may have about taking PrEP. It explains what it is, how it works and how to take it. If you have any questions, please talk to your sexual health doctor.

### **Confirming your identity**

Before you have a treatment or procedure, our staff will ask you your **name and date of birth** and check your **ID band**. If you don't have an ID band we will also ask you to confirm your address.

**If we don't ask these questions, then please ask us to check.**  
Ensuring your safety is our primary concern.

## **What is PrEP?**

PrEP stands for pre-exposure prophylaxis. It involves using anti-HIV drugs (antiretrovirals) before HIV exposure (prophylaxis means to prevent or control the spread of an infection or disease). PrEP aims to prevent HIV infection from taking hold if you are exposed to the virus. This is done by taking a tablet called Truvada that contains two drugs: tenofovir and emtricitabine. This can be by taking the tablet every day or 'on demand' (described on page four). Truvada has been used successfully to control and manage HIV for many years; it was approved for the treatment of HIV in 2004 and for use in PrEP by authorities in the US in 2012.

## **How well does PrEP work?**

It does not provide complete protection from getting HIV. It has been tested in several large studies with men who have sex with men, men who have sex with women, and women who have sex with men. In most studies, patients were advised to take PrEP every day. If taken every day, it can offer around 85-90% protection from getting HIV. In one study, however, PrEP was taken by men who have sex with other men only around the times when the person thought they were at risk of getting HIV. This is called 'on demand'. This also showed high levels of protection of around 86%. Details of the different ways in which PrEP can be taken are described on page four. You can find more information about these studies at [www.cdc.gov](http://www.cdc.gov) and [www.i-base.info](http://www.i-base.info).

## **What are the benefits of PrEP?**

It may be of benefit for some people who have a higher risk of coming into contact with HIV through sex. You should consider PrEP if you are a gay man/man who has sex with other men (MSM) and you sometimes have sex without using a condom. In addition, you might consider PrEP if you are a man or woman who is from a community in the UK where HIV is more common and you sometimes have sex without a condom; for example black African men and women. The doctor you see at your Sexual Health Centre can give you advice on this.

## **What are the risks?**

- If you become HIV positive while taking PrEP, there is a risk that your HIV could become resistant to the drugs in the Truvada pill. This would mean that these drugs could not be used to treat you. If you restart PrEP after a break in which you have unknowingly caught HIV, the risk of resistance will be higher.
- If you do not use condoms, you will be at risk of other sexually transmitted infections.
- All drugs have potential side effects. Common side effects of Truvada include nausea and diarrhoea, but these are usually mild and happen in the first month of taking it.

A small number of people develop reduced kidney function but it usually goes back to normal when they stop taking the drug. Long-term use of Truvada could also reduce the density (thickness) of your bones. This does not usually cause problems.

## **If I take PrEP, can I stop using condoms during sex?**

Do not stop using condoms because you are taking PrEP. Both PrEP and condoms offer a lot of protection against HIV, if used correctly, but neither are 100% effective.

Condoms also give you protection against other sexually transmitted infections (STIs), whereas PrEP does not. So you will get the most protection against HIV and other STIs if you continue to take PrEP and use condoms.

## **My regular partner has HIV. Should I take PrEP?**

This depends on:

- whether or not you use condoms with your partner
- whether or not your partner is on HIV treatment and has an undetectable viral load (a measure of how much virus is in their bloodstream).

If your partner is not on HIV treatment, you should always use condoms. PrEP will give you extra protection if the condom breaks. Alternatively, if you choose not to take PrEP and your partner is not on HIV treatment and the condom breaks, you should seek post-exposure prophylaxis (PEP). You can get PEP from a Sexual Health Clinic or from an A&E department (if overnight or at a weekend). You need to start this as soon as possible and no later than 72 hours after exposure.

If your partner takes their anti-HIV treatment every day as prescribed, they have an undetectable viral load and you have no other sexual partners, you do not need to take PrEP as it does not give you extra protection. This is because someone who has an undetectable viral load is effectively not infectious. You may however, in this circumstance, choose to use condoms with your partner for added protection.

### **How do I start PrEP?**

If you would like to discuss starting PrEP, you can talk with your sexual health doctor. They can arrange an appointment for you at the PrEP clinic at the Caldecot Centre at King's College Hospital.

At the PrEP clinic, if you and your doctor agree that PrEP may reduce your risk of getting HIV, you will need a general health check. This includes blood tests for HIV, other STIs and kidney function (similar to what happens in a Sexual Health clinic). Depending on your history and recent risks for HIV, the doctor may give you a prescription to start PrEP immediately or advise you to start after getting your HIV test results back to show that you are definitely HIV negative.

### **Will I have any follow-up appointments?**

When you take PrEP medicines, you need to have regular check-ups at the PrEP clinic about every three months. We will give you advice on reducing your risk of HIV through sexual behaviour and do blood tests for HIV and to see how your kidneys are reacting to Truvada. You should take your medicine as prescribed. Your doctor at the PrEP clinic will advise you on ways to help you take it regularly so that you do not get HIV. If you have trouble remembering to take your medicine or want to stop PrEP, speak to your doctor at the PrEP clinic.

### **How long do I need to take PrEP for?**

You should discuss this with the doctor in clinic. Generally, you should continue to use PrEP as long as you are at an increased risk of HIV.

You may want to stop taking PrEP if:

- your risk of getting HIV reduces because your circumstances change
- you find you do not want to take a pill every day or often forget to take your pills. Other ways of protecting yourself from HIV may work better for you, for example, just using condoms.

If you have side effects from the medication that are affecting your life, or if blood tests show that your body is reacting badly to PrEP, your doctor may stop prescribing it for you.

### **Does PrEP interact with any other medications?**

The drugs in Truvada have few interactions. You should always tell anyone who prescribes your medication (such as your GP) that you are taking Truvada so they can check for any interactions. It is important to avoid long-term use of non-steroidal anti-inflammatory drugs as both these and Truvada can cause kidney problems. If you have any concerns about other medications you are using with Truvada, you should discuss this with the doctor in the clinic.

### **Can I share my PrEP with other people who might be at risk of HIV?**

No. It is very important that you never share any of your prescribed drugs with anyone else, including PrEP. This is because there are potential side effects and drug interactions which may harm others. Also, if a person is HIV positive but they do not know they are and they take PrEP, they may become resistant to the medications they will need once they have been diagnosed. This could make their HIV more difficult to treat and compromise their long-term care.

## Is PrEP free on the NHS?

No. At the moment, PrEP is not available on prescription through the NHS. This means that you have to pay for prescriptions. Medication costs are about £411 (price correct January 2016) for 30 tablets; you can get these from King's.

## Can I get PrEP from somewhere else?

Some people choose to buy PrEP from sources outside the NHS (for example, from websites). Only Truvada prescribed by a licensed medical practitioner and dispensed from a NHS hospital pharmacy (or through a regulated community pharmacy) can be guaranteed a legitimate drug. To check the legitimacy of medications bought elsewhere, some blood tests can be done to:

1. Check how much tenofovir and emtricitabine is in your bloodstream. This test is called Therapeutic Drug Monitoring (TDM).
2. Check your liver and kidney function test results.

These tests are only basic safeguards and you use unregulated medications entirely at your own risk.

## What are the different ways in which the doctor might prescribe PrEP?

### Daily regimen

- Try to take Truvada at the same time every day. Set an alarm on your phone and download an app to help you remember.
- If you miss a tablet, take one as soon as you remember. If this is within 12 hours of your usual dose time, you can take two doses in one day. If it is more than 12 hours since your usual dose time, take the next dose.
- After taking Truvada for two weeks, the drug in your cells is high and constant. If you miss three tablets in a row after this period, you can start taking your tablets every day again. If you miss four or more pills in a row and know you are going to be at risk within the next 24 hours, you can take a double dose 2 – 24 hours before you have sex, and continue the medication every day, or as described in the intermittent regimen. (see section below).
- Frequently missing pills may mean that you get HIV. If you get HIV and continue to miss pills, you may develop resistance to Truvada. So if you have missed tablets and could have caught HIV, it is important to have a HIV test.
- If you have not taken your PrEP for five days or more and you know you are going to be at risk, take a double dose before sex and continue as before.

### Intermittent regimen ('on demand')

If you have sex only **once**:

- i. Take two Truvada tablets 2 – 24 hours before sex.
- ii. Then, take one Truvada tablet 24 hours after the first dose and another 24 hours later (that is, 48 hours after the first).

If you have sex **more than once over a period of more than 24 hours**

- Take your Truvada as described in points (i) and (ii) but also take one tablet every day on the days you are having sex.

For example, if you have sex more than once between Friday and Sunday:

- Take two Truvada tablets 2 – 24 hours before you have sex the first time (Friday).
- Then take one tablet about the same time on Saturday and Sunday
- Then take one Truvada tablet around 24 hours (Monday) and 48 hours (Tuesday) after the last time you had sex on Sunday.

You should not take more than seven tablets in one week.

## **What if I miss or am late taking my tablets on the intermittent regimen?**

You should be very careful to avoid being late or missing PrEP. This is because taking PrEP irregularly is likely to be less 'forgiving' than daily PrEP. If you are late taking your dose (but within 12 hours), take the dose as soon as you remember and your next dose on time. If you are more than 12 hours late, you should discuss this with your GUM doctor immediately. If out of normal working hours, go to Accident and Emergency (A&E) and the staff there will be able to advise you.

## **What symptoms may I get if I get HIV?**

Many people develop symptoms soon after getting HIV. They can be quite vague and include:

- fever
- swollen lymph nodes (glands)
- swollen tonsils
- a sore throat
- joint and muscle aches
- diarrhoea
- a rash.

Symptoms can begin anywhere from a few days after being exposed to HIV up to eight weeks later and usually last for about 14 days. They could last for just a few days, or they could last for several months.

## **Who can I contact with queries and concerns?**

If you have queries or concerns, please call the Caldecot Centre on 020 3299 5000 and ask to speak with Dr Killian Quinn or Dr Michael Brady.

## **Sharing your information**

We have teamed up with Guy's and St Thomas' Hospitals in a partnership known as King's Health Partners Academic Health Sciences Centre. We are working together to give our patients the best possible care, so you might find we invite you for appointments at Guy's or St Thomas'. To make sure everyone you meet always has the most up-to-date information about your health, we may share information about you between the hospitals.

## **PALS**

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you.

PALS at King's College Hospital, Denmark Hill, London SE5 9RS:

Tel: 020 3299 3601

Email: [kch-tr.pals@nhs.net](mailto:kch-tr.pals@nhs.net)

You can also contact us by using our online form at [www.kch.nhs.uk/contact/pals](http://www.kch.nhs.uk/contact/pals)

PALS at Princess Royal University Hospital, Farnborough Common, Orpington, Kent BR6 8ND:

Tel: 01689 863252

Email: [kch-tr.palskent@nhs.net](mailto:kch-tr.palskent@nhs.net)

If you would like the information in this leaflet in a different language or format, please contact PALS on 020 3299 1844.

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