

Pre-Exposure Prophylaxis Guidelines

For specifics & details [click here](#)

PrEP should be considered for any person with a risk for HIV acquisition that is greater than zero.



The Facts *PrEP Works*

- Men who have sex with men and transgender women - 99% reduction in HIV transmission
- Heterosexual women and men – 99% reduction in HIV transmission
- Persons who inject drugs (PWID) – 74% reduction in HIV transmission
- Adolescents who weigh over 35kg – same results as adults

All of these results assume **excellent adherence** to the prescribed medication



Follow-up

- Ongoing engagement with both clinical and non-clinical staff in PrEP center
- Visit every 3 months if on pills and every 2 months if on injections
- In-person and telemedicine follow-ups
- Lab, including HIV and STI testing, at follow-up visits



Authoritative sources

- CDC:
<https://www.cdc.gov/hiv/clinicians/prevention/index.html>
- USPSTF:
<https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/prevention-of-human-immunodeficiency-virus-hiv-infection-pre-exposure-prophylaxis>
- ACOG:
<https://www.acog.org/clinical/clinical-guidance/practice-advisory/articles/2022/06/pre-exposure-prophylaxis-for-the-prevention-of-human-immunodeficiency-virus>

The future of PrEP:

- Longer acting injectables
- Longer Acting pills
- Implants
- Patches