Use of HIV Pre-Exposure Prophylaxis During Pregnancy and Lactation at Two United States Medical Centers

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BACKGROUND
- 468,000 women eligible for pre-exposure prophylaxis (PrEP) for HIV prevention in the U.S.1
- Pregnancy may increase susceptibility to HIV.
- Acute HIV during pregnancy -> 8X increased risk perinatal transmission.2
- Acute HIV during breastfeeding -> 4X increased risk of lactational transmission.2
- No published reports of PrEP use after 7 weeks gestation or during lactation.

OBJECTIVE
Describe offering PrEP with oral emtricitabine/tenofovir to women at substantial risk of HIV during pregnancy and lactation at two U.S. centers.

METHODS
- Retrospective chart review at two U.S. medical centers in San Francisco, CA and Bronx, NY.
- Referred to specialty clinics for women living with or at substantial risk of HIV.

RESULTS
- 67% of those offered PrEP chose to use PrEP.
  • Among those who did not choose PrEP, 67% chose condoms, 56% treatment as prevention, 22% abstinence.
  • Median time on PrEP: 30 weeks (range 4-74)
  • 50% reported adherence challenges:
    - 33% side effects; 33% social stressors; 33% daily pill difficulty.
- No PrEP-related pregnancy complications.
- 57% in care at delivery had no postpartum follow-up.
- Breastfeeding: 50% of those on PrEP breastfed; 53% of those not on PrEP breastfed.

CONCLUSION
Women at two U.S. medical centers frequently chose to use PrEP for HIV prevention when offered during pregnancy & lactation.
Identification of women at substantial risk occurs at multiple points in health systems. Multidisciplinary trainings needed on:
- Screening, referral, PEP/PrEP
- Postpartum period is particularly vulnerable to loss to follow-up, missing opportunity for safe, effective HIV prevention.
- Supporting retention in care is key in preventing maternal HIV acquisition, perinatal & lactational transmission.
Further research & education needed to close critical gaps in:
- Screening women at risk of HIV for PrEP eligibility
- Linkage to care preconception, during pregnancy and lactation

REFERENCES & DISCLOSURES

References

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