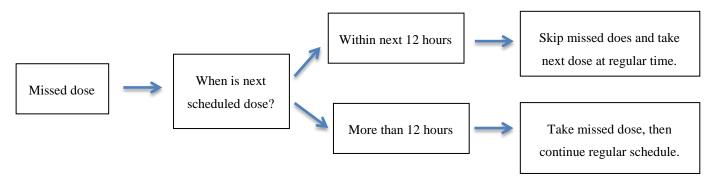
## **Appendix D: PrEP FAQs**

#### How effective is PrEP?

Using PrEP can lower your risk of getting HIV by 92-99% (compared to not taking PrEP). PrEP is most effective when taken every day.

[92% comes from a secondary analysis in the iPrEx study that compared people who had detectable drug levels in their body versus those who did not, all within the group assigned to take PrEP. 99% comes from the iPrEx Open-Label Extension that used tenofovir concentrations in dried blood samples to correlate with adherence (# of tablets per week)—no HIV infections were detected in those who took at least 4 tablets per week.]

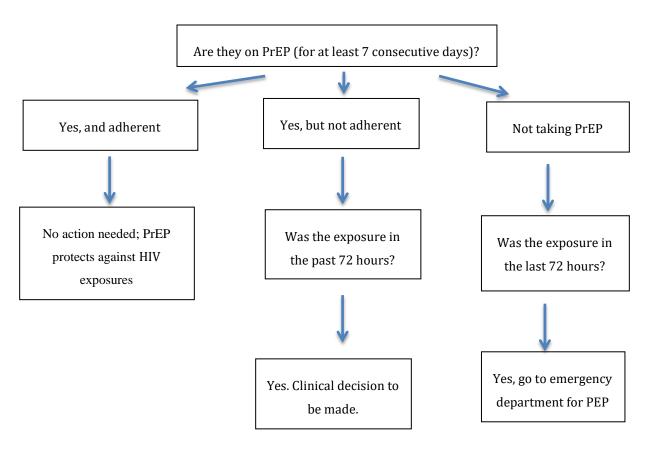
#### What to do if patient misses doses?



If patient missed 3 or more doses:

■ It will take 7 consecutive days of PrEP to build up to protective drug levels again → encourage condom use or safer sex techniques

#### What to do if the patient had an HIV exposure



### What is on-demand dosing of PrEP?

On Demand dosing may be appropriate for select patients. Based on available evidence, on-demand dosing can only be considered in men who have sex with men.

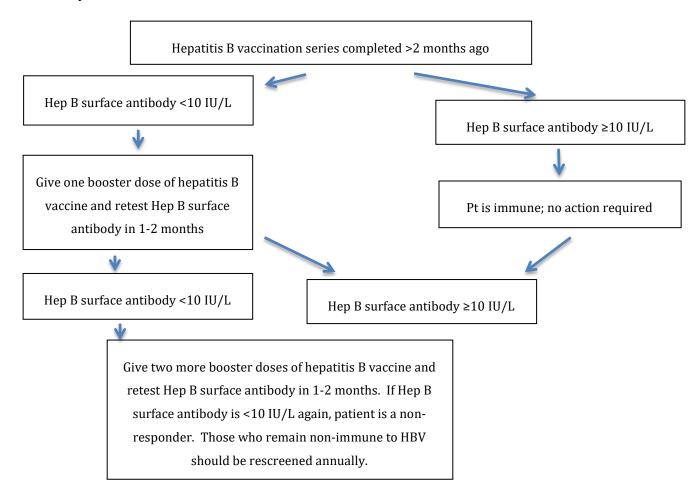
On-demand dosing, take two pills together 2-24 hours before the first sexual exposure to HIV, followed by one pill once daily until 48 hours after the last sexual activity. On-demand dosing of PrEP should not be initiated without prior consultation with a health care provider.

#### When can on-demand dosing of PrEP be used?

On-demand may be considered to decrease pill burden in those who have infrequent sexual exposures. Patients being considered for On-Demand dosing must be aware of the need to take the regimen as prescribed and how to manage exposures when PrEP has not been taken. Patients will still need to be tested as per guidelines for daily dosing. Counselling patients on On-Demand dosing should include risks of HIV infection and reduced efficacy compared to daily dosing.

# What to do if patient had completed the hepatitis B vaccination series, but surface antibody screening result is "non-immune", i.e. <10 IU/L?

"Non-immune" results of hepatitis B surface antibody screening only confirm no immune response if done 1-2 months after the last vaccination. See flowchart below for testing hepatitis B surface antibody >2 months after the last vaccination:



Pre-Exposure Prophylaxis Guidelines Review for Primary Care Practitioners in Saskatchewan (2019 August)