

019.2 PRE-EXPOSURE PROPHYLAXIS AND RISK COMPENSATION: EVIDENCE OF DECREASED CONDOM USE AT THREE-MONTH FOLLOW-UP AMONG PREDOMINANTLY GAY MALE PARTICIPANTS IN THE VICPREP STUDY

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Introduction Pre-exposure prophylaxis (PrEP) decreases HIV risk among uninfected people, but risk compensation may affect prevention benefits. PrEP trials and extensions found no decrease in condom use, but included extensive prevention education. We investigated condom use in the VicPrEP study, the first implementation study of PrEP in routine practice in Australia.

Methods Enrollment commenced in June 2014, with capacity for 115 at risk HIV negative gay/bisexual men, transgender people and heterosexual serodiscordant couples seeking to conceive. Participants are recruited from three GP clinics, one sexual health clinic, and one hospital clinic in Melbourne. Participants consent to using daily Truvada for at least one year, and complete baseline and three-monthly clinical evaluations and self-report behavioural surveys.

Results At 31 March 2015, 92 participants completed baseline surveys, and 76 completed three-month follow-up; all gay/bisexual men (mean age 37.7 years; 67.4% university educated; 75.0% Australian born). In the past three months half had regular partners (Baseline: 48.9%, Follow-up: 55.8%; ns); nearly all had casual partners (Baseline: 90.2%, Follow-up: 88.2%; ns). Mean frequency of intercourse in the past three months remained stable for regular partners (Baseline: 19.0, Follow-up: 18.9; ns), and decreased for casual partners (Baseline: 19.1, Follow-up: 16.0; $p = 0.056$). Condom use was assessed on a 5-point scale (1 = never, 5 = always), and decreased with regular partners (Baseline: mean 2.0 [SD 1.6], Follow-up: mean 1.7 [SD 1.3]; $p = 0.048$), and casual partners (Baseline: mean 3.0 [SD 1.3], Follow-up: mean 2.5 [SD 1.4]; $p = 0.002$). Serosorting, viral load sorting, strategic positioning and withdrawal remained unchanged with regular and casual partners.

Conclusion This is the first study documenting a decrease in condom use amongst HIV-negative gay/bisexual men using PrEP. Findings highlight the potential for risk compensation to reduce benefits of PrEP when implemented in routine practice, if adherence is insufficient. This underscores the continued importance of promoting sexual risk reduction practices, including condom use.

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019.3 PILLS, PLEASURE AND PRIVACY: EARLY EXPERIENCES OF PRE-EXPOSURE PROPHYLAXIS AMONG MEN IN THE VICPREP STUDY

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Background There has been limited research on the lived experience of taking antiretrovirals as HIV pre-exposure prophylaxis (PrEP). We explored men's experiences as participants in Australia's first PrEP demonstration project.

Methods After attending clinic visits, participants completed a self-report online survey on behaviour, attitudes and experiences. This paper analyses responses to the first (i.e. 3-month) survey on: 1) pill taking (including adherence and interruptions); 2) sex since starting PrEP; and 3) disclosing PrEP use. Responses to items on experiences of PrEP were measured on a 5-point scale (1 = strongly disagree, 5 = strongly agree).

Results At 31 March 2015, 76 participants had completed a 3-month survey; all gay/bisexual men (mean age 37.7 years). Forty-one men (53.9%) reported missing any PrEP doses. The median number of doses missed was 1 (mean 2.04). Missing doses was most commonly attributed to forgetting. Six men reported interrupting PrEP for 2 days or more. Side-effects (usually mild) were reported by 34 men (44.7%).

Participants strongly agreed that PrEP had reduced their worries about HIV acquisition (mean 4.53; SD 0.77); they agreed that they were open with sexual partners about PrEP (mean 4.20; SD 1.2), and agreed that PrEP made them feel more confident about sex (mean 4.17; SD 0.98). Participants moderately agreed that they were careful to whom they disclosed (mean 3.36; SD = 1.4). However they disagreed that they had experienced negative reactions (mean 1.99; SD 1.14), and disagreed