EARLY ANTIRETROVIRAL THERAPY AND PRE-EXPOSURE PROPHYLAXIS FOR HIV PREVENTION AMONG FEMALE SEX WORKERS IN COTONOU, BENIN: EARLY FOLLOW-UP AND ADHERENCE DATA

Introduction
To assess the feasibility and usefulness of integrating treatment as prevention (TasP) and pre-exposure prophylaxis (PrEP) with Truvada® to the combination prevention package offered to female sex workers (FSWs) in Cotonou, we are currently carrying out a demonstration project on these two HIV preventive strategies among FSWs.

Methods
We are currently recruiting 100 HIV-infected FSWs for TasP and 250 HIV-negative FSWs for PrEP (one-year recruitment period, followed by an additional one year of follow-up). The actual recruitment visit is preceded by a screening visit two weeks earlier in order to determine the HIV status and assess other eligibility criteria. Through follow-up visits at day 14 and then quarterly, we closely monitor treatment adherence, using various tools including a pill count strategy. For the latter, we ask participants to bring in their bottles of medication at each visit. We report here on the first five months of the clinical phase of the study.

Results
From 18th September 2014 to 28th February 2015, we screened 154 FSWs and out of them, 85 and 34 were recruited in the PrEP and TasP arms, respectively. Median age of the participants was 34 years and 38% were from Benin, whereas the other were from surrounding countries. To 28th February, the overall retention rate in the study was 100% for TasP and 85% for PrEP. Most drop-outs were due to mobility and leaving the sex trade. Adherence to PrEP was 84% according to pill count. The adherence levels, although estimated through a simple method that could lead to overestimations, could be improved and a multi-faceted adherence education program is now implemented.

Conclusion
The availability of Truvada® blood levels will allow an objective assessment of adherence, a highly crucial parameter for the success of eventual PrEP programs.

Disclosure of interest statement
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PHARMACISTS PERCEPTIONS ENGAGING IN HIV PREVENTION ACTIVITIES WITH POPULATIONS AT-RISK FOR HIV INFECTION

Objective
2.1 million people worldwide, including 40,000 Americans become infected with HIV each year. As medication experts and healthcare professionals that are very accessible to patients, pharmacists are well positioned to conduct HIV prevention activities including promotion of pre-exposure prophylaxis (PrEP) and providing access to sterile syringes to people who inject drugs (PWIDs). There is a paucity of research examining pharmacists’ attitudes about providing HIV prevention services to at-risk populations. We examined pharmacists’ perceptions in engaging in HIV-related counselling, condom use and PrEP.

Methods
We asked 225 pharmacists from 41 US states questions about their comfort-level counselling on: 1) HIV/AIDS, 2) condom use, 3) clean needles to PWIDs and 4) PrEP use; interacting with HIV-positive 5) MSMs and 6) heterosexuals; and 7) selling needles to PWIDs. We ran individual generalised linear modelling (GLM) regressions for each question, and report our findings below.

Results
Of 225 participants, nearly half (41%) worked in the top HIV counties where the vast majority of PLWHA reside.