

## HIV PrEP and PEP: Best Practices During COVID-19

During the COVID-19 pandemic, health care providers should minimize in-person encounters for nonurgent care and continue to provide access to [pre-exposure prophylaxis \(PrEP\) and emergency post-exposure prophylaxis \(PEP\)](#) to prevent HIV.

### **General Guidance**

- Provide clinical services via telephone or video conference, when possible.
- Encourage patients to use mail-order pharmacies or delivery services to order PrEP.
- Share this guidance and [tips for enjoying safer sex](#), through mass emails or individual sessions with patients.

### **Starting Patients on PrEP**

[Initiating PrEP](#) typically involves an in-person visit for counseling, screening and specimen collection. Providers can use the strategies below for alternatives to clinic visits. Patients can also order PrEP [online](#) for home delivery.

### **Prescribing PrEP**

Providers can discuss a patient's interest in taking PrEP via telephone or video conference.

- Tenofovir disoproxil fumarate-emtricitabine (TDF/FTC) remains the [first-line regimen for PrEP](#). Tenofovir alafenamide-emtricitabine (TAF/FTC) may benefit patients who have impaired renal function or who are at risk of osteopenia or osteoporosis.
- During the COVID-19 pandemic, providers may prescribe 90 days of medicines to patients taking daily PrEP. [Guidelines](#) recommend initially prescribing 30 days of PrEP.
- Taking [PrEP on demand](#), only before and after sex, is an option to daily dosing for cisgender men who have sex with men and are taking TDF/FTC. TAF/FTC **should not** be used on demand given the lack of data for this dosing schedule.

### **HIV Testing**

Before beginning PrEP, patients should be screened for existing HIV infection with an antigen/antibody test.

- Patients who in the past 90 days have had symptoms of HIV infection or possible HIV exposure should still take an HIV antigen/antibody test before starting PrEP.
  - Patients can provide blood for antigen/antibody testing at a commercial laboratory near their home.
- Patients who in the past 90 days have **not** had symptoms of HIV infection or possible HIV exposure may screen themselves for HIV antibodies using a home test kit. Patients can obtain a home test kit using **one** of the options below:
  - Clinics can sign up with the [NYC Home Test Giveaway](#) to have HIV home test kits shipped to eligible patients free of charge.
  - Patients may purchase a home test kit at a local pharmacy or [online](#).

## **STI Screening**

Ask patients about sexually transmitted infection (STI) symptoms, including dysuria and anogenital discomfort, ulcers and rash.

- Follow [NYC guidance](#) on syndromic management by treating STIs presumptively and prescribing oral medicines when possible.
- Counsel PrEP patients who have not recently had laboratory-based three-site STI screening that they may have asymptomatic STIs that they could transmit to others.

## **Hepatitis B**

Delay hepatitis B screening unless urgently necessary.

- Patients starting PrEP are typically screened for hepatitis B antibodies and surface antigen to determine if they should be vaccinated or if an active infection can be simultaneously treated with TDF/FTC.
- Patients with liver disease may be at elevated risk of severe COVID-19 and should take extra precautions to [avoid exposure to COVID-19](#).

## **Following Up with Patients on PrEP**

Unless a patient requires an in-person visit, follow up every three months by telephone or video conference to:

1. Assess PrEP adherence
2. Ask about side effects of medicines and symptoms of acute HIV and other STIs
3. Refill prescriptions

Providers can also discuss the potential for COVID-19 transmission and [how to reduce the risk](#) with patients who want to have sex with a non-household partner.

## **HIV and STI testing**

PrEP patients who are adherent to PrEP and get tested every three months can reduce in-person testing to every six months.

- **HIV:** Patients can receive a [home test kit through their clinic](#) or purchase one at a pharmacy or [online](#).
- **Other STIs:** Based on symptoms and possible exposure, [treat presumptively](#) and prescribe oral medicines when possible. Patients who require in-person evaluation or injectable treatment can get care at select [NYC Sexual Health Clinics](#) ([see below for more information](#)).

## **Testing for Renal Function**

Screen for serum creatinine and creatinine clearance three months after PrEP initiation and then every six months. Patients can provide a blood sample at a commercial laboratory near their home.

## Refilling Prescriptions

Provide patients with a 90-day supply of PrEP unless they have paused their PrEP use.

## Pausing or Reducing PrEP Use

Patients who have sex less frequently during the COVID-19 pandemic may want to discuss taking a break from daily PrEP.

- **Taking PrEP on demand:** Cisgender men who have sex with men and are taking TDF/FTC can conserve their supply of medicines by taking [PrEP on demand](#), before and after sex.
- **Pausing PrEP:** Cisgender men who have sex with men and are taking TDF/FTC should continue to take PrEP until at least two days after they last had sex. Others, including cisgender women and people taking TAF/FTC, should continue PrEP for seven days after they last had sex.
- **Restarting PrEP:** People who have not had sex or injected drugs since stopping PrEP do **not** need an HIV test. According to the [Centers for Disease Control and Prevention](#), people who have receptive vaginal sex or inject drugs need to take PrEP for 21 days to achieve maximum protection. Cisgender men who have sex with men taking TDF/FTC can restart PrEP by taking two pills, two to 24 hours before sex.

## Emergency PEP

People can receive emergency PEP without a visit to a clinic or emergency room by calling the 24/7 NYC PEP hotline at **844-3-PEPNYC** (844-373-7692).

- Qualified patients will receive an electronic prescription for a full 28 days of PEP medicines and a home self-test kit for baseline HIV testing.
- Patients requiring an in-person consultation will receive a starter pack of PEP medicines and an appointment at a nearby clinic that is seeing patients for PEP.
- The NYC PEP hotline or an affiliated clinic will arrange follow-up consultation to discuss medication adherence and possible side effects.
- The hotline also provides home kits so patients can test themselves after completing PEP.

## NYC Sexual Health Clinics

[NYC Sexual Health Clinics](#) provide STI and HIV telemedicine services via the NYC Sexual Health Clinic Hotline (**347-396-7959**), Monday to Friday, 9 a.m. to 3:30 p.m. Select clinics see patients for emergency contraception, emergency PEP, HIV treatment initiation and other services with referral from this hotline. See updated information on [hours and services](#).

**The NYC Health Department may change recommendations as the situation evolves.**

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