Insufficient PrEP monitoring and HIV drug resistance

V. Tittle, M. Boffito, K. Gedela, T. Suchak, S. Patel, A. McOwan, G. Whitlock



Chelsea and Westminster Hospital NHS NHS Foundation Trust





M184V/I and K65R

- M184V/I Emtricitabine/FTC
- K65R Tenofovir disoproxil fumarate/TDF
- UK HIV drug resistance database
 - ART-naïve patients = 3.2% NRTI (2014)
 - ART-experienced = 14.7% NRTI (2014)

PrEP resistance...what we know

Type of resistance found in PrEP studies:

FTC-related

PROUD/iPrEX

TDF/FTC

TDF2 (one patient)

Acute HIV infection at risk

- 1. McCormack S, Dunn DT, Desai M et al. Pre-exposure prophylaxis to prevent the acquisition of HIV-1 infection (PROUD): effectiveness results from the pilot phase of a pragmatic open-label randomised trial. Lancet Sept 2015 387(10013):53-60
- 2. Grant RM, Lama JR, Anderson PL, et al. Preexposure Chemoprophylaxis for HIV Prevention in Men Who Have Sex with Men. N Engl J Med 2010; 363:2587-2599
- 3. Thigpen MC, Kebaabetswe PM, Paxton LA, et al. Antiretroviral Preexposure Prophylaxis for Heterosexual HIV Transmission in Botswana. N Engl J Med 2012; 367:423-434

PrEP resistance...what we know

Case report of transmitted resistance

JAMA review, 2018

- Resistance doesn't occur in adherent patients
- Resistance occurs < 0.1%

CROI Abstract 107 2019

- 95 previous PrEP users/ 3721 new diagnoses
- 26% vs 2% had M184I/V/IV/MV (p=<0.0001)
- 4 pts had K65R but none in PrEP group

PrEP at 56 Dean Street







& Monitoring at baseline and during usage

Aims

- Review of newly Dx HIV
 - baseline resistance of M184V/I or K65R
 - AND pre-PrEP use
- Review patient journeys
- Review management of these patients

Methodology

- Newly Dx HIV database July 2015- January 2019
- Retrospectively reviewed case notes

Inclusion criteria	Exclusion criteria		
Newly Dx HIV	Transfer of care/previously known		
MI84V/I at baseline	HIV diagnosed at PEP f/up		
K65R at baseline	<18 yr olds		
Documented PrEP use <6/12			

Results

- 991 new HIV positive patients, 10 patients M184V/I
- 5 patients with M184V and/or I AND previous PrEP-use
- 0 = K65R

(Nil from IMPACT or PrEP shop)

Results 2

- All cis male, MSM
- Ages 28-45 years old
- CD4 430-1480
- Duration on PrEP
 - $< 3/12 \times 3$
 - -<12/12 x2
- Range of months since last negative HIV test
 - = 2-12 months

Patient journeys

Patient	PrEP source	Dosage	Adherence	Baseline HIV test	RITA	HIV Viral load (cpm)	VRT
1	Online	Event- based	Poor	Unknown	>4/12	2190	M184I
2	Online	Daily	Poor	No	<4/12	<20 *16 days later = 368	MI184VI *16 days later
3	Online	Daily	6/7 pills before UPAI	Failed test	<4/12	2415	M184I
4	Unknown	Unknown	Unknown	No	>4/12	70768	MI184 V/I
5	Online	Daily	Stopped 2/12 prior to Dx	No	<4/12	523	M184V

Management

- All (n=5) = TDF/FTC
 + Rezolsta (4)
 + DTG (1) due to DDI with Seretide
- Number of days from Dx to Rx
 - median 9 days, range 6-50 days
- VL at 3/12
 - $-3 \times < 20$
 - 2x LTFUP

Conclusions

- Patients still became undetectable on treatment
- The importance of 'attending' for a test
- If HIV +, should patients be intensified instead of stopping TDF/FTC

Limitations

- Retrospective
- Unable to determine time and nature of acquisition
- Small number of patients
- Not yet able to obtain denominator of those taking PrEP
- Missing data

Acknowledgements

To all the authors and Dr Nneka Nwokolo Special thanks to

Sheena Mc Cormack, Gary Whitlock, Mike Rayment and Rachael Jones

All the staff at 56DS