Australian HIV Pre-exposure Prophylaxis (PrEP) Clinical Guidelines Published by ASHM in Journal of Virus Eradication

Australia, 6 July 2017


Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM) President Prof Mark Boyd said, these guidelines represent an adaptation and a revision of the 2014 United States Centers for Disease Control’s PrEP guidelines. ASHM thanks the CDC for this opportunity to update ASHM’s 2015 PrEP guidelines by using the structure and format of the 2014 CDC PrEP guidelines. The 2017 Australian PrEP Guidelines have the benefits of having been being written and edited by clinicians, epidemiologists and representatives of peak Australian HIV community organisations who have significant experience of PrEP in the clinical, research and real world settings. These guidelines are written for clinicians who will be initiating PrEP and monitoring people taking PrEP and are designed to reflect Australia’s unique epidemiology.

The recommendations included in the Guidelines are designed to:

- support the prescription of PrEP using the ARTG-listed drugs and other bioequivalent generic drugs that are available in Australia, or are being used in Australian PrEP trials
- assist clinicians in their evaluation of patients who are seeking PrEP
- to assist clinicians in commencing and monitoring their patients on PrEP by providing information on PrEP dosing schedules, management of side-effects and toxicity, use of PrEP in pregnancy and in chronic hepatitis B infection and how to cease PrEP.

The 2017 ASHM PrEP Guidelines address some of the more nuanced clinical issues and populations which were not addressed in the 2015 ASHM PrEP Guidelines including:

- Trans and gender diverse people
- Specific guidance on risk assessment to assist in determining an individual’s eligibility for PrEP
- Use of a case-by-case approach to determine an individual’s eligibility for PrEP
- Justification for the choice of PrEP schedule
- How to monitoring individuals receiving PrEP in the longer term
- Stopping and starting PrEP and taking a break from PrEP
- Monitoring Hepatitis C in PrEP users
- Discussion of a range of special clinical considerations

“The guidelines respond directly to the needs of clinicians and recognise the value of the clinician patient partnership when deciding if a patient is eligible for PrEP; these guidelines have flexibility so that if an individual patient doesn’t meet the formal eligibility criteria to commence PrEP, the clinican may exercise their clinical judgement to offer PrEP to the patient”, said Boyd.

“I think we have all come to understand that PrEP is a very straight forward prevention regimen, one pill daily. Decisions around starting PrEP, stopping PrEP and maintaining PrEP are all issues which are influenced by individual
circumstances. That so many people have already enrolled in PrEP studies and demonstration projects in Australia is testament to the importance the community places on reducing the transmission of HIV.”

The Pharmaceutical Benefits Advisory Committee (PBAC), an independent expert body appointed by the Australian Government, will be discussing two applications for the reimbursement of PrEP drugs on the pharmaceutical benefits scheme (PBS) this week. The existence of published these Australian PrEP Guidelines designed to assist clinicians and patients manage PrEP should give greater confidence to the PBAC in making its deliberations.

For more information, or further comment:

- **Edwina Wright** (Department of Infectious Diseases, Alfred Health, Monash University, Melbourne)
  M: 0414 242 600  |  E: e.wright@alfred.org.au

- **Mark Boyd** (Kirby Institute, University of New South Wales, Sydney; University of Adelaide, Lyell McEwin Hospital, Elizabeth Vale, South Australia)
  M: 0424 144 186  |  E: mark.boyd@adelaide.edu.au

- **Iryna Zablotska** (Kirby Institute, University of New South Wales, Sydney)
  M: 0406 021 376  |  E: izablotska@kirby.unsw.edu.au


---

**About the Australasian Society for HIV Medicine (ASHM)**
ASHM is a peak organisation of health professionals in Australia and New Zealand who work in HIV, viral hepatitis and sexually transmissible infections (STIs). Our vision is to see the virtual eradication of HIV, viral hepatitis and sexually transmissible infections. Our mission is to support the health workforce achieve this—through education and training; policy and advocacy; direct action and leadership.