

Acceptance of HIV home self-testing to follow-up PrEP users from a community center in Barcelona. A response to the pandemic-related barriers to maintain prevention programs and scale up PrEP usage

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Background

Implementation of PrEP in Spain by the National Healthcare System took place by the end of 2019. In March 2020, the COVID-19 pandemic caused a general lock-down in the country and challenged all healthcare systems to reinvent adapting to this new reality, including screening and prevention programs. After the first year of implementation of PrEP, coverage was not enough, and long waiting lists were the common for centres that by that date were providing PrEP.

In 2021 BCN PrEP-Point modified the follow-up protocol, set from complete follow-up appointments every 3 months (Including HIV, Syphilis, Chlamydia, Gonorrhoeae, liver and kidney function) to requiring such complete testing every 6 months and 'quick follow-up' appointments (Including a HIV home self-test and Gonorrhoeae/Chlamydia screening) in between.

Eligibility criteria for this type of follow-up was:

1. Users who had taken PrEP for longer than 1 year.
2. Users who had good adherence to the medication and to the follow-up visits.
3. Record of an adequate kidney and liver function.

These changes aimed to respond to the pandemic situation, reducing the time users needed to physically be at the centre, physical contact with the staff, keeping a follow up of and allow more people to be included in the program, while also involving PrEP users in their own care.

With the present study, we wanted to evaluate the implementation of such changes and its acceptance by our PrEP users.

Description

This poster is an evaluation of the usage of HIV home self-testing to follow-up with men who have sex with men and transgender people taking PrEP in the PrEP-Point, a community-based center in Barcelona.

An online-based survey invitation was sent, informed consent was requested, and local data protection laws were assured.

The survey asked about:

- Accuracy and clarity of the information/instructions given to perform the test
- Experience of performing the HIV home self-test and STIs samples collection
- The convenience of this 'quick follow-up' visit
- Difficulties faced during the process.

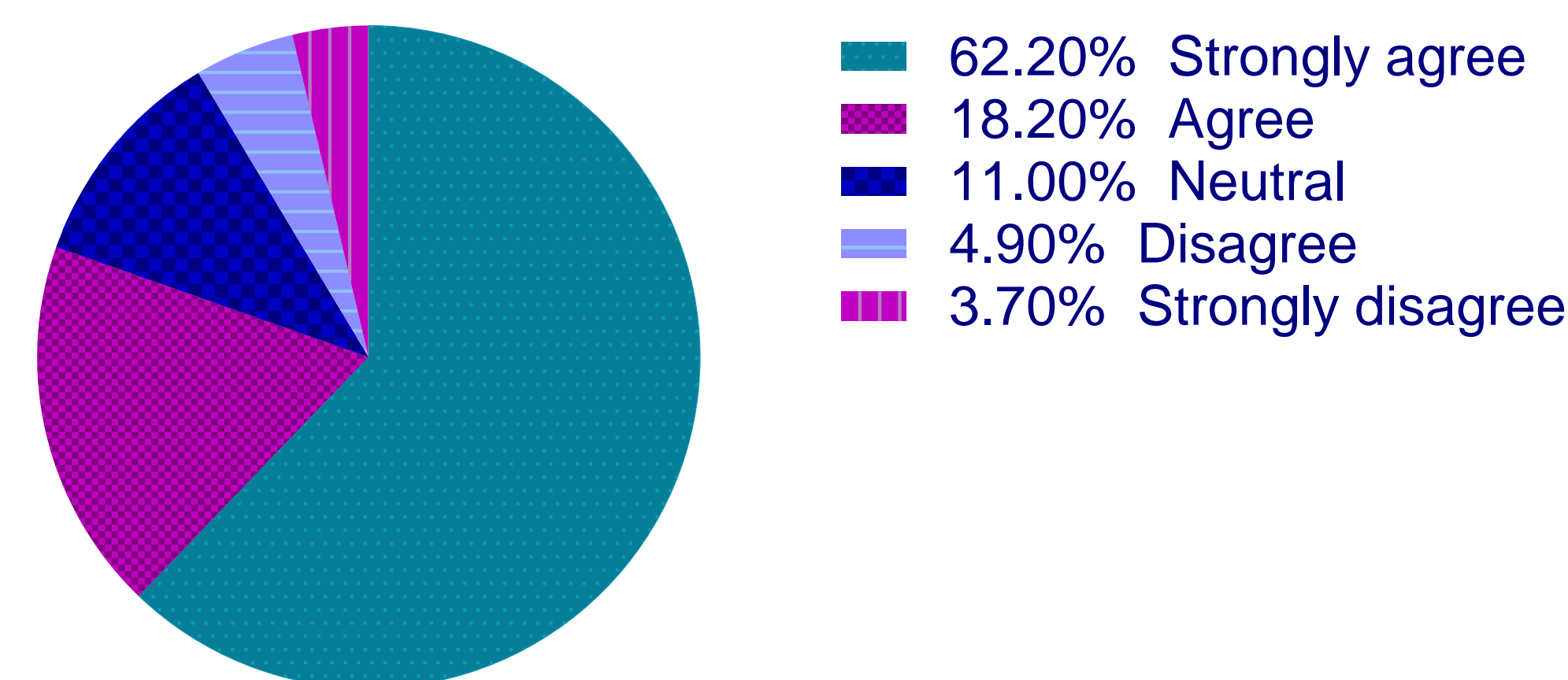
Responses were collected, analyzed and discussed by the PrEP team.

Lessons learned

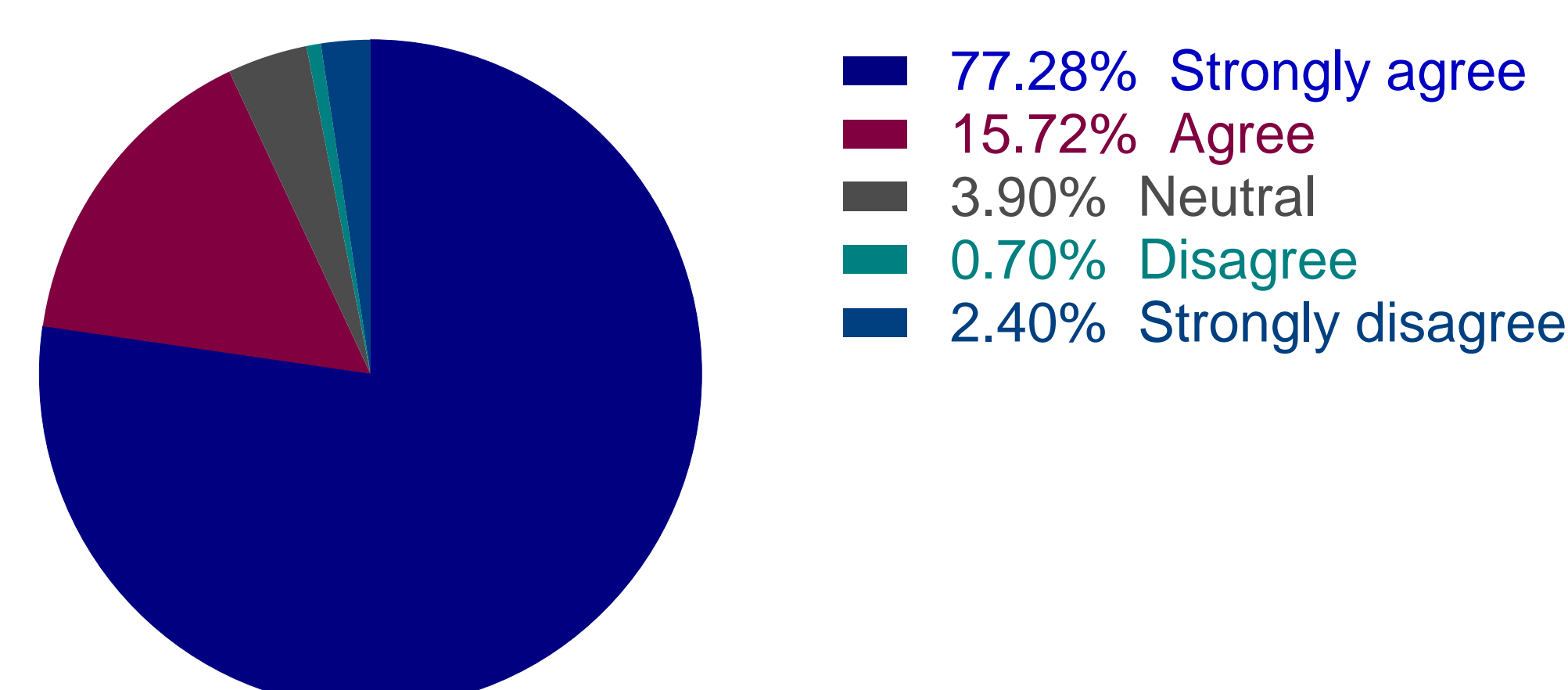
434 participants answered the survey. 94.1% of participants agreed that the information and instructions for HIV home self-testing were clear and adequate. 75.5% found it easy to perform the HIV home self-test, and 92.9% found it easy to read the result. 95.8% of respondents found the 'quick follow-up' visit convenient and agile.

	N (%)
Invitation to answer the questionnaire	815
Not able to contact	18
Answer	434 [108 CAT, 304 SPA, 22 ENG]
Excluded	18
Potential participants	779
Completed questionnaires	413 (53%)
Not completed questionnaires	3 (0,4%)
No answer	363 (46,6%)

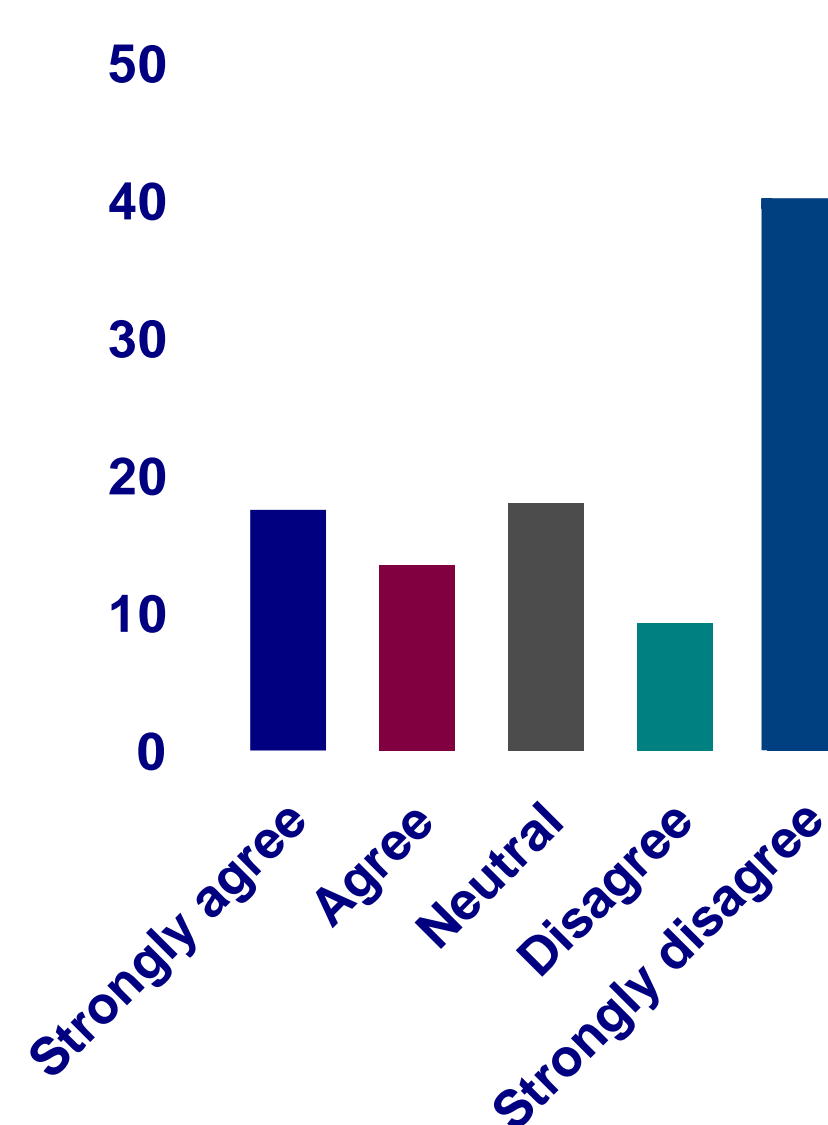
Did you find autotest easy to perform?



Did you find autotest results easy to read?



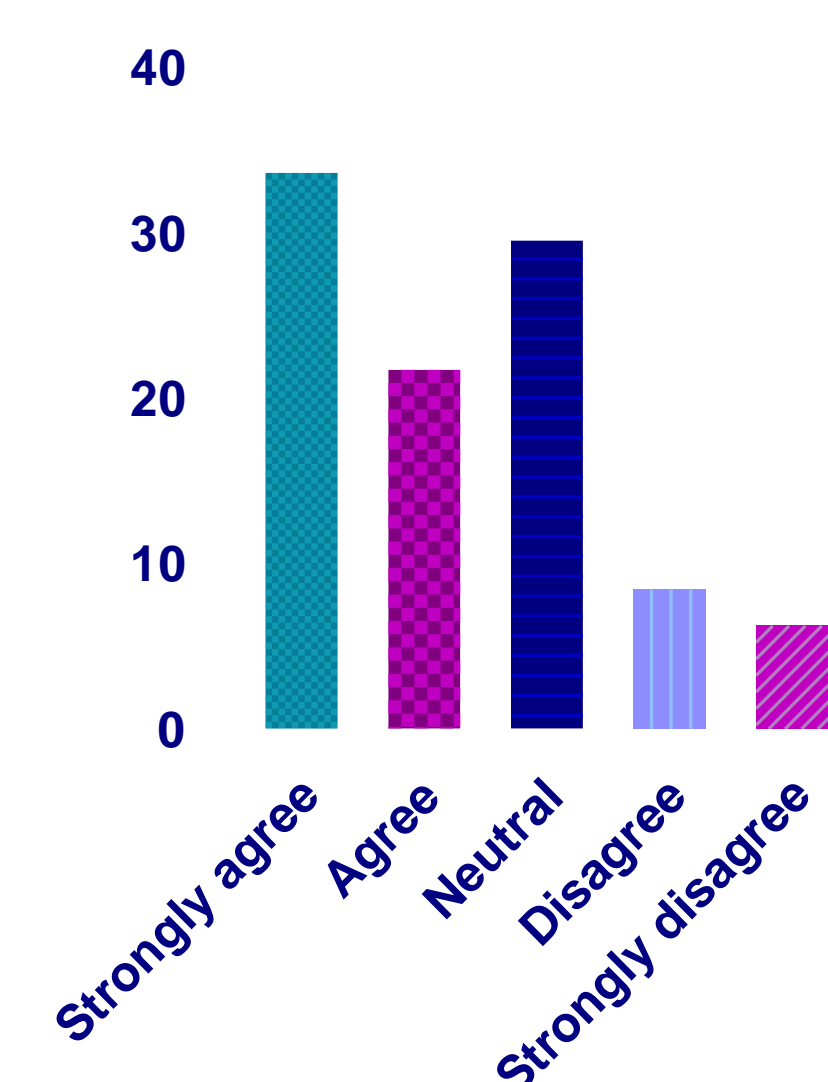
Felt more anxiety performing the test by myself



However, 31.8% of the users felt anxiety about performing the HIV home self-test and 15.2% suggested they didn't feel like using this service.

Since implementation, the number of PrEP users has increased 18.9% and waiting list has been considerably reduced, shortening the time between demanding the service and actual access to this prevention tool.

Consider this change is good for the PrEP follow-up



Conclusions

- These changes have allowed the PrEP program to expand and were well received, encouraging users to be more responsible for their own care.
- Additional support was offered to users who experienced anxiety or didn't feel like using the service.
- We expect the number of people that feel uncomfortable and/or anxious to reduce as users become accustomed to performing home self-testing in the future.
- Home self-testing has become increasingly popular and offers a cheap, simple and useful tool in HIV prevention.