

# EVOLUTION OF NONOCCUPATIONAL POSTEXPOSURE PROPHYLAXIS USE SINCE 2010 IN A THIRD-LEVEL HOSPITAL

García Jiménez L, Arias Moya MA, Bécares Martínez FJ, De Gorostiza Frías C, Cordero Guijarro A, Ardizzone Jiménez B.

Hospital Pharmacy Unit (Hospital Universitario Fundación Jiménez Díaz)

## Background:

Nonoccupational postexposure prophylaxis (PEP) is a strategy to prevent new potential cases of human immunodeficiency virus (HIV) when primary prevention fails. However, it should never replace safe sex practices.

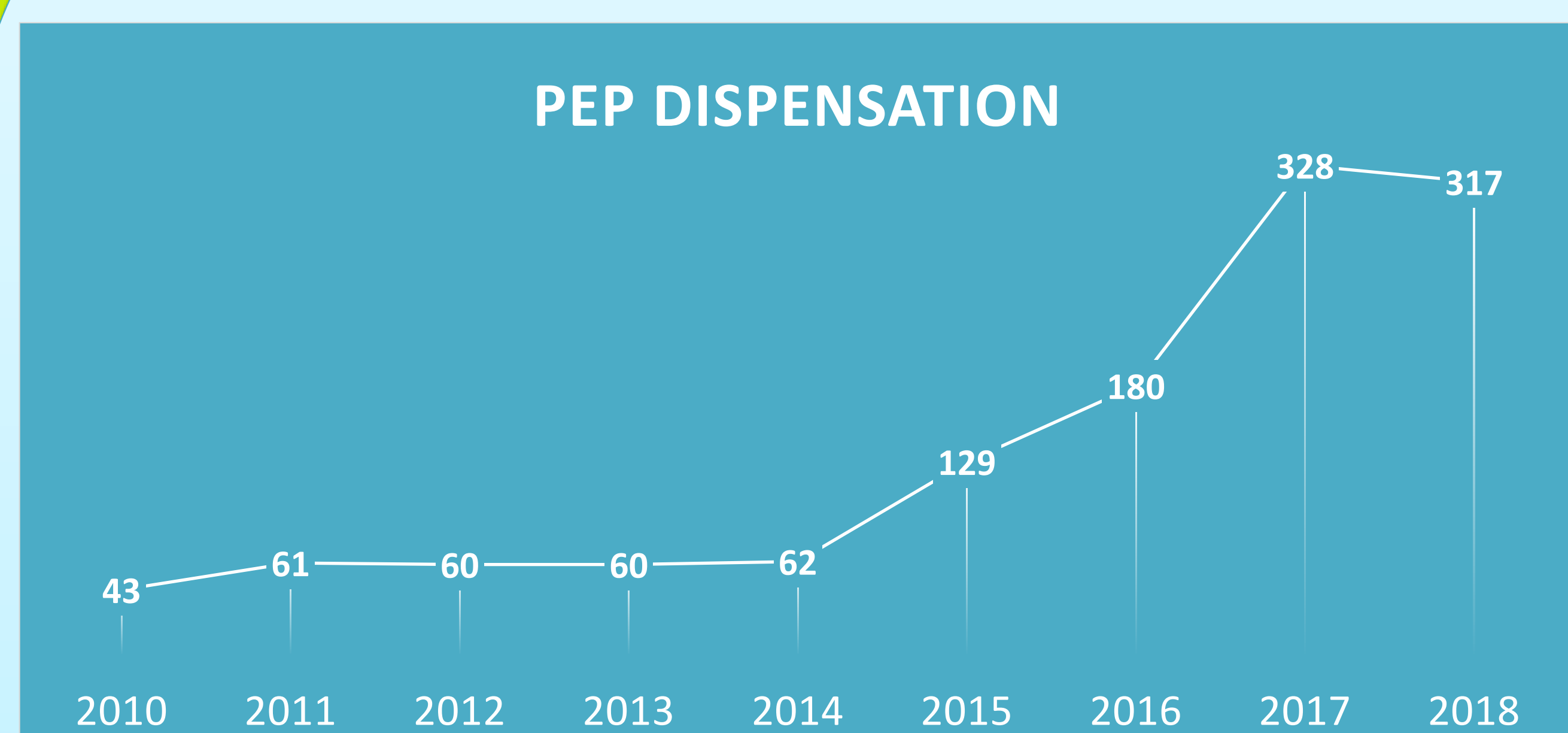
## Purpose:

We aim to analyze the evolution in PEP use in our hospital through the last eight years. Also we want to evaluate its long-term efficacy avoiding new HIV cases.

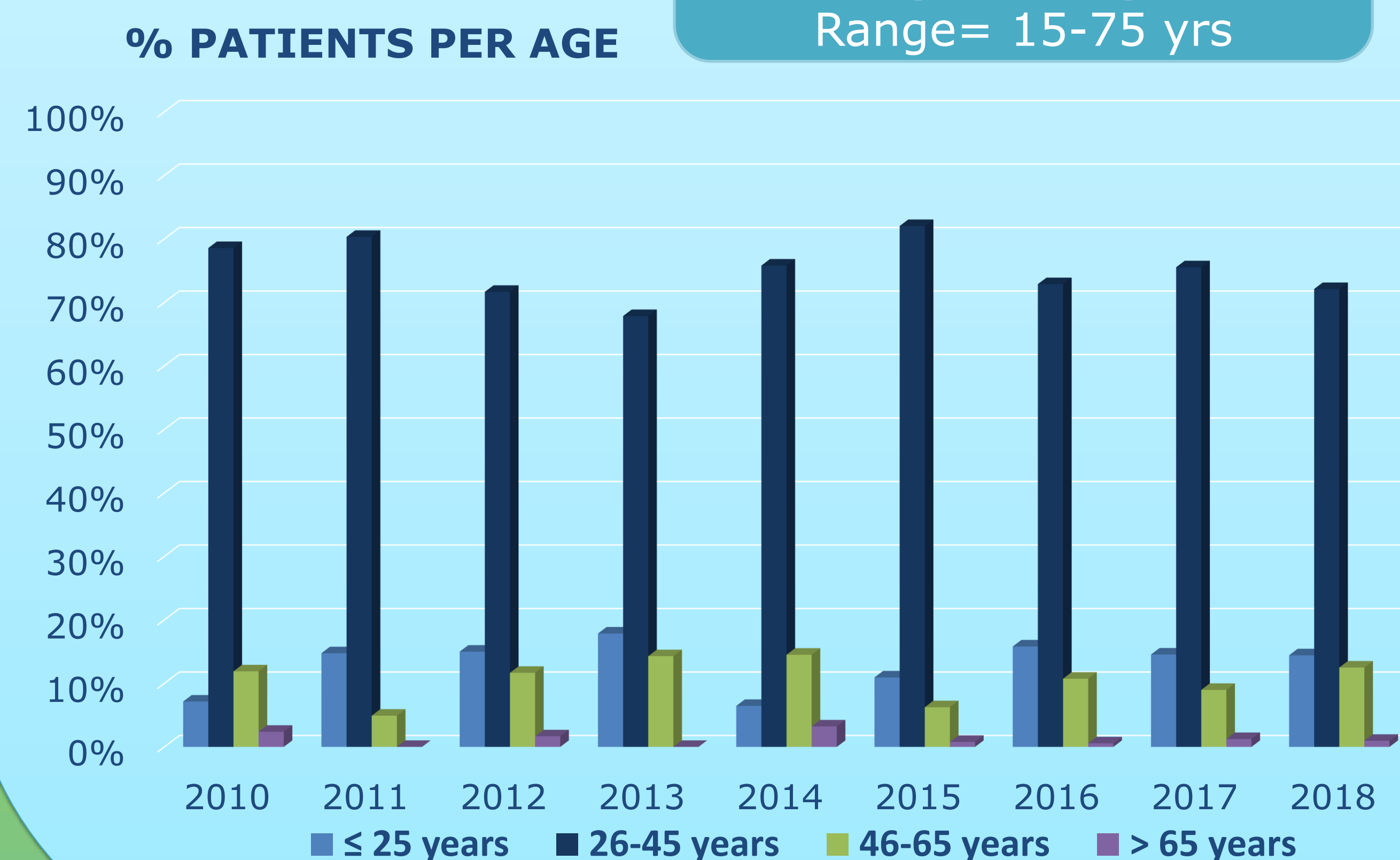
## Material and methods:

- ✓ **Design:** observational descriptive study.
- ✓ **Population:** people included in PEP dispensation register of our third-level hospital since 2010 to 2018.
- ✓ **Descriptive statistics:**
  - Evolution in number of cases since 2010.
  - Distribution of gender and age.
  - Number of PEP dispensations to the same person.
- ✓ We looked for HIV treatment dispensations performed after PEP treatment in order to assess new HIV infections.

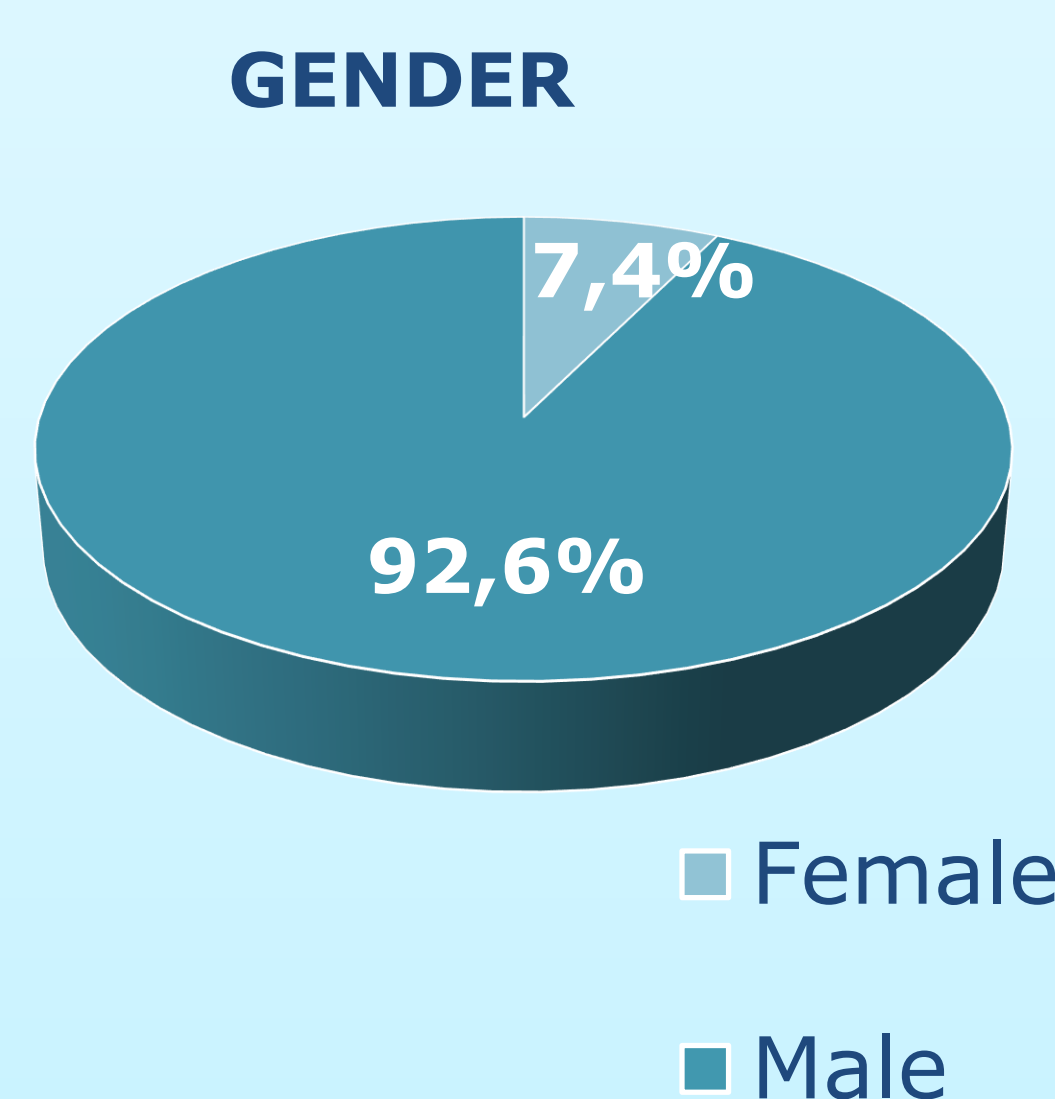
1240 dispensations since 2010 to 2018



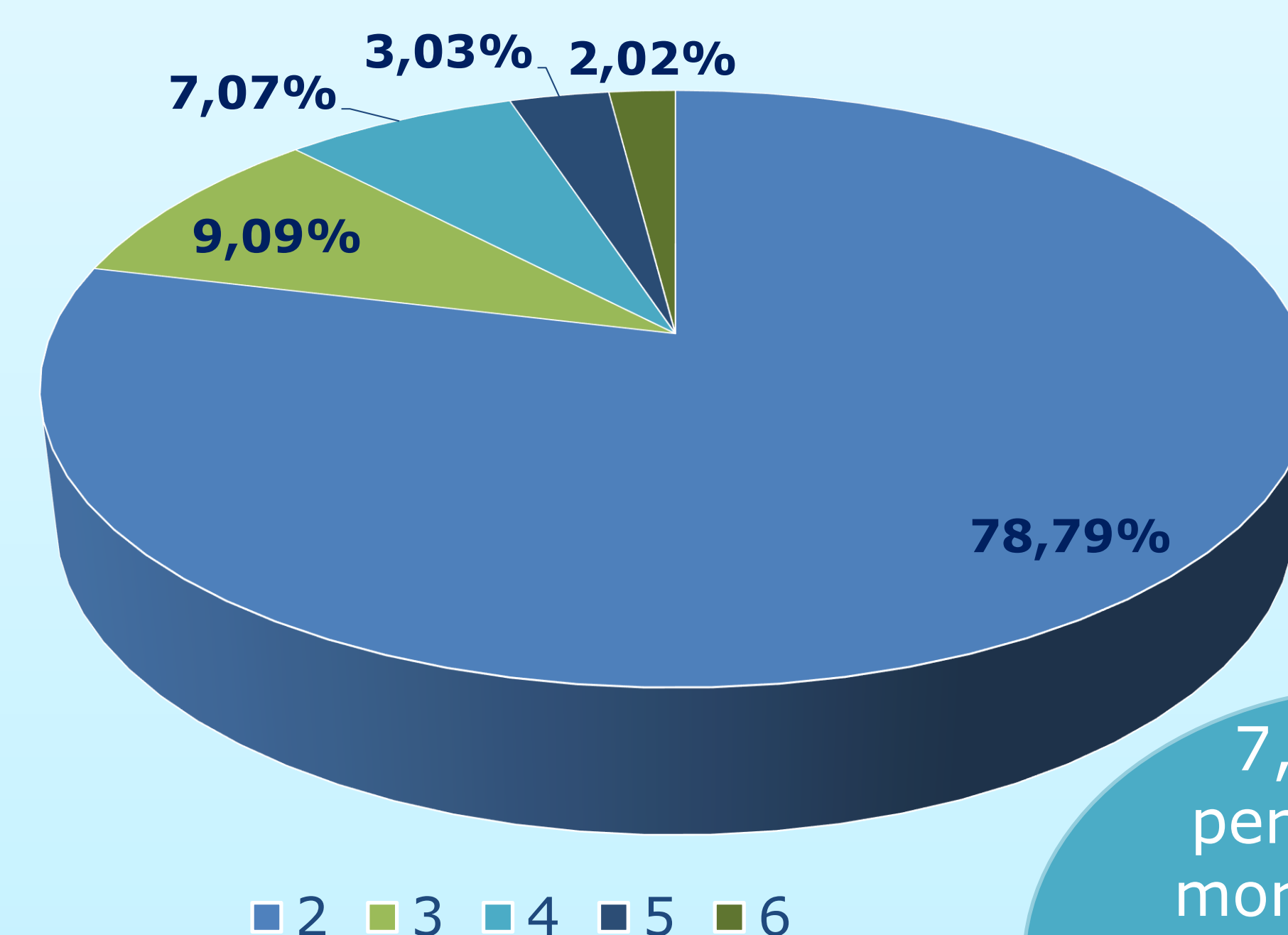
Mean age = 34 yrs  
(±8,98)  
Range = 15-75 yrs



## Results:



Number of dispensations in persons who received more than one PEP treatment



7,98% (99 persons) with more than one PEP dispensation since 2010 to 2018

HIV new infections

- ☐ **2,18% (27 persons) were diagnosed of HIV after PEP treatment, along studied period.**
  - ☐ **5 cases were diagnosed in the initial serology performed just at the end of PEP treatment. Perhaps they might had been infected in a previous moment.**
  - ☐ **Only 2 cases were diagnosed along the 6 months after PEP treatment, so they could be PEP failure.**

## Conclusions:

Despite PEP has shown efficacy in HIV prevention, people who misuse it and disparege safe sex, have risk of long-term HIV infection in future episodes and moreover, risk of other sexual transmission infections. Knowing the profile of PEP user and misuser (in our case young men about 34 years old) can help pharmacist to develop educational strategies focused on encouraging primary prevention.

