## HIV FACTSHEET

### BIOMEDICAL PREVENTION OF HIV: PrEP AND PEP

<table>
<thead>
<tr>
<th>PRE-EXPOSURE PROPHYLAXIS (PrEP)</th>
<th>POST-EXPOSURE PROPHYLAXIS (PEP)</th>
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<tbody>
<tr>
<td><strong>What are PrEP and PEP?</strong></td>
<td><strong>PEP is used to help prevent the acquisition of HIV infection by individuals who may have been recently exposed to HIV.</strong></td>
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<td>PrEP involves taking a combination of medications to reduce the risk of acquiring HIV infection. It can be taken by HIV-negative individuals at high risk of infection. When taken as prescribed, the medication reduces the risk of acquiring sexually transmitted HIV by more than 90%. If an individual acquires HIV infection, PrEP must be discontinued immediately.</td>
<td><strong>PEP can reduce the risk of HIV infection by more than 80%, when used as prescribed.</strong></td>
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<th><strong>When is it taken?</strong></th>
<th><strong>PrEP is taken once a day, on an ongoing basis, in advance of high risk activity. PrEP is less effective if the prescribed dosing schedule is not followed.</strong></th>
<th><strong>PEP is effective when taken within 72 hours of suspected high risk exposure to HIV. It involves antiretroviral medications taken once daily for four weeks (28 days).</strong></th>
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</table>
| **Who should be considered for PrEP and PEP?** | **Individuals at high risk of HIV infection:**  
• engages in condomless sexual activity with an HIV-positive partner who is not on treatment or whose viral load* is ≥ 200 copies/ml  
• engages in condomless sexual activity with a partner whose HIV status is unknown  
• engages in sexual activity that involves:  
  • no or inconsistent condom use  
  • exchange of sex for drugs or money  
  • use of illicit drugs or alcohol dependence  
  • shared drug use equipment  
  • have a diagnosis of sexually transmitted infections (STI)  
  • prison experience  
In addition, PrEP should be considered for individuals who have taken PEP (i.e., who are at ongoing, high risk of infection). | **PEP should be considered for individuals:**  
• who have had a high-risk exposure to HIV in the workplace (e.g., healthcare setting) or  
• who have had a high-risk exposure to HIV outside of the workplace (e.g., condomless sex with an HIV-positive partner who is not on treatment or whose viral load* is ≥ 200 copies/ml, sexual assault, etc.) |

* There is effectively no risk of sexual transmission of HIV when the viral load is < 200 copies/ml.
OTHER CONSIDERATIONS

- Strict adherence to the prescribed regimen is essential for the efficacy of PrEP and PEP. Regular HIV and STI testing (i.e., at least once every 3 months) is necessary for patients taking PrEP.
- PEP complements, but doesn’t replace, other HIV prevention methods such as condoms or PrEP.
- Consult with your provincial/territorial HIV programs for more information on coverage of PrEP and PEP through provincial/territorial drug formularies.

For more prevention and treatment information, consult an infectious disease specialist or physician with experience in the management of HIV.

Additional Resources

- Government of Canada: HIV and AIDS for Health Professionals
- Health Canada’s Regulatory Decision Summary
- Canadian Guideline on HIV Pre-exposure Prophylaxis and Non-occupational Post-exposure Prophylaxis
- CATIE: Post-exposure Prophylaxis (PEP)
- CATIE: Oral Pre-exposure Prophylaxis (PrEP)
- HIV HIRI Risk Index for Men Who Have Sex With Men