

A Longitudinal Analysis of PrEP Eligibility Among Women who Inject Drugs

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BACKGROUND

- Women who inject drugs (WWID) have overlapping sexual and injection HIV risk behaviors.
- Pre-exposure prophylaxis (PrEP) is key for HIV prevention among WWID, as it is user-controlled, but only 1-2% of WWID are currently using PrEP.^{1,2}

AIM

- To characterize factors associated with longitudinal PrEP eligibility to inform PrEP implementation efforts

METHODS

- Population.** WWID who were HIV-negative and enrolled in the AIDS Linked to the Intravenous Experience (ALIVE) Cohort study from 2014-2020.
- Data Collection.** Socio-demographic characteristics, substance use, depressive symptoms, and sexual/injection risk factors were collected at semi-annual visits via interviewer-administered and audio-computer-assisted standardized surveys.
- PrEP Eligibility**
 - Sex-related (2 or more male sex partners with inconsistent condom use, partner with known HIV or who injects drugs, transactional sex, or bacterial sexually transmitted infection) in the past six months
 - Injection-related (sharing needles or drug use equipment) in the past 6 months
- Statistical Analysis.** Associations between individual factors and PrEP eligibility in the same visit were estimated using unadjusted and adjusted logistic regression analysis with generalized estimating equations.

41% of WWID were PrEP-eligible at baseline and WWID were PrEP-eligible for 71% of study follow up

Table 1. Baseline (first included visit) sociodemographic and drug use characteristics among WWID enrolled in the ALIVE study, stratified by PrEP eligibility (N=382).

	Not PrEP Eligible N=225	PrEP Eligible N=157	Total N=382	p-value
Years in Follow-Up	3.6 (2.2)	2.5 (2.0)	3.2 (2.1)	<0.01
Age	52 (7)	44 (11)	49 (10)	<0.01
Race/Ethnicity				<0.01
Non-Hispanic White	29 (13%)	63 (40%)	92 (24%)	
Non-Hispanic Black	180 (80%)	83 (53%)	263 (69%)	
Other	16 (7%)	11 (7%)	27 (7%)	
Completed High School	84 (37%)	82 (52%)	166 (43%)	0.04
Marital Status- Married	37 (16%)	30 (19%)	67 (18%)	0.48
Currently Working	17 (8%)	22 (14%)	39 (10%)	0.04
Income <\$5,000	174 (78%)	122 (78%)	296 (78%)	0.97
Homeless (past 6 mos)	8 (4%)	49 (31%)	57 (15%)	<0.01
Responsible for a Child	39 (17%)	51 (32%)	90 (24%)	<0.01
Severe Depression ¹	80 (36%)	75 (48%)	155 (41%)	0.02
Jail/Prison	2 (2%)	9 (8%)	11 (6%)	0.12
Overdose	8 (4%)	22 (14%)	30 (8%)	<0.01
Any MOUD ²	118 (52%)	109 (69%)	227 (59%)	<0.01

Footnotes: 1. Severe Depressive Symptoms, defined by a score >23 on the Center for Epidemiologic Studies Depression Scale (CESD); 2. MOUD: Medications for Opioid Use Disorder.

Periods of PrEP eligibility were associated with unstable housing, criminal legal involvement, depressive symptoms, and overdose among WWID.

Table 2. Unadjusted and Adjusted Odds Ratios of Factors associated with Longitudinal PrEP Eligibility among WWID [N (Study Visits)= 3470].

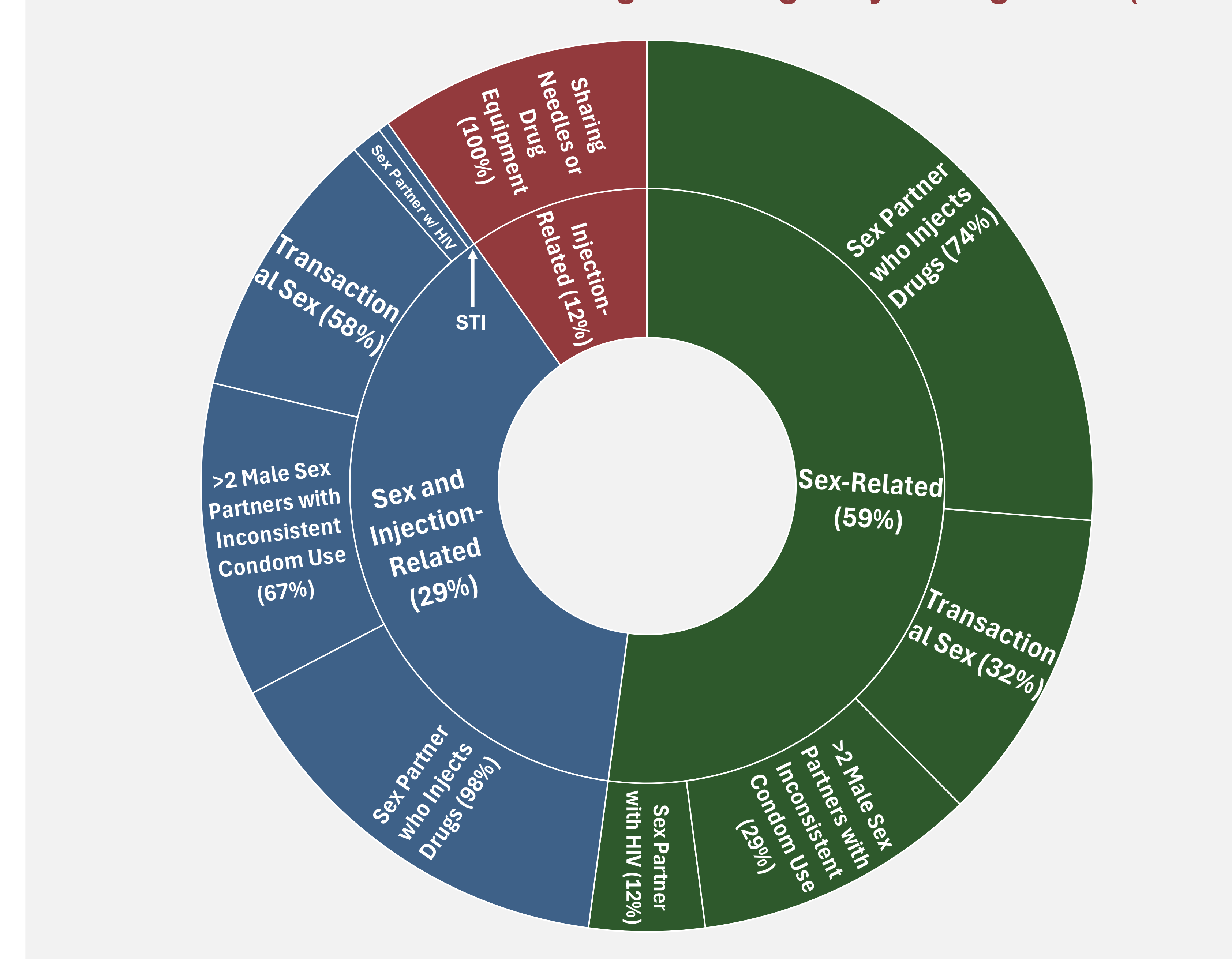
	Unadjusted Odds Ratio (95% CI)	Adjusted Odds Ratio (95% CI)
Age, in years	0.91 (0.90-0.93)	0.92 (0.90-0.94)
Black vs. other race	0.28 (0.20-0.39)	0.76 (0.51-1.15)
Currently married	1.23 (1.00-1.51)	1.25 (0.99-1.59)
High school education	1.45 (1.10-1.93)	1.45 (1.06-1.99)
Any homelessness	1.89 (1.49-2.38)	1.42 (1.09-1.84)
Recent prison/jail	2.26 (1.41-3.63)	2.15 (1.24-3.73)
Severe depressive symptoms ¹	1.39 (1.19-1.62)	1.28 (1.07-1.53)
Recent overdose	1.78 (1.32-2.40)	1.57 (1.13-2.18)
MOUD	1.30 (1.08-1.56)	1.20 (0.97-1.49)

89% of PrEP-Eligible WWID met Sex-Related PrEP Eligibility Criteria

41% of PrEP-Eligible WWID met Drug-Related PrEP Eligibility Criteria

62% of PrEP-Eligible WWID reported Minimal to No Self-Perceived HIV Risk

FIGURE 1. Characteristics Conferring PrEP Eligibility among WWID (N=157)



CONCLUSIONS

- PrEP-eligibility is common among WWID and primarily driven by sexual risk factors.
- PrEP-eligibility persisted throughout the majority of study follow up.
- WWID frequently underestimated their own HIV risk.
- PrEP implementation strategies for WWID could consider incorporating PrEP into substance use disorder & mental health treatment, housing services, and legal assistance to increase uptake.

CONTACT INFORMATION

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