

# PrEP Pilot Mecklenburg County

Presented by Renate Nnoko, MBA(Executive), MPH

Senior Health Manager –Ending the HIV Epidemic

Preventive Health , Mecklenburg County Public Health

[renate.nnoko@mecklenburgcountync.gov](mailto:renate.nnoko@mecklenburgcountync.gov) | 980-867-8865

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# Objective

- Provide an overview of Mecklenburg County's (MeckCo.'s) PrEP Pilot (now known as the PrEP Initiative)
- Share 2 year evaluation report of pilot
  - Determine the public health/clinical effectiveness and whether the pilot effectively reached the priority uninsured population

# MeckCo.'s PrEP Initiative ~~Pilot~~

- Increase access to PrEP for low income, uninsured high risk MeckCo. residents who are at high-risk of acquiring HIV.
- MeckCo. covers the cost of medical visits, labs, and STI treatment
- Manufacturer company's Patient Assistance Program provides medication

# MeckCo.'s PrEP Initiative

- Supported by the Board of County Commissioners;  
funded beginning in Dec. 2017
- Partnership between MCPH and 7 clinical-practices  
across 10 sites
- A working example of Public Health 3.0

# MeckCo.'s PrEP Initiative

- First clinic contract signed March 2018
- Started off as a pilot project and became an Initiative July 2020
- MCPH partnered with sites that already provided PrEP services/had the infrastructure in place

# MeckCo.'s PrEP Initiative

- Program evaluation component conducted by the Academy for Population Health Innovation (APHI, a University of North Carolina in Charlotte (UNCC)-MCPH partnership)
- Funding included a marketing component

In 2018, the Charlotte Metropolitan area ranked

26th

Rate of New HIV Infection, 2018

14.4 per 100,000	11.4 per 100,000
Charlotte-Concord-Gastonia, NC SC MSA	United States

In the Nation for rate of new HIV diagnosis

Source: CDC. [Diagnoses of HIV infection in the United States and dependent areas, 2018](#)

Prepared by: Mecklenburg County Public Health, Epidemiology Program



© simpsonmaps 2015

Map Source: Charlotte Chamber of Commerce

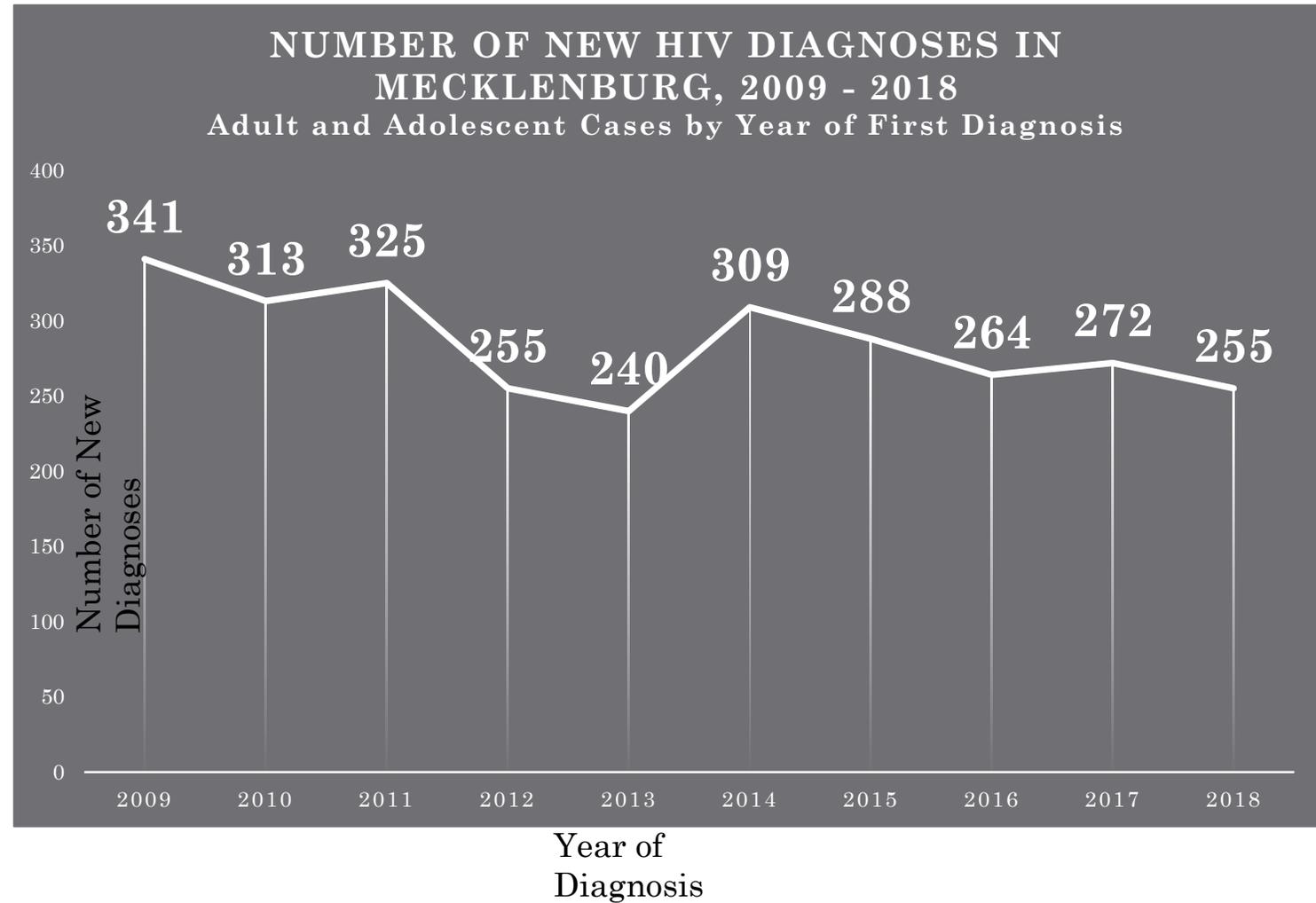


## Trends in Local HIV Diagnoses

As of Dec. 2018,  
**6,847 persons** live with  
HIV infection in  
Mecklenburg.

**Dramatic declines in  
annual HIV infections  
have stopped**

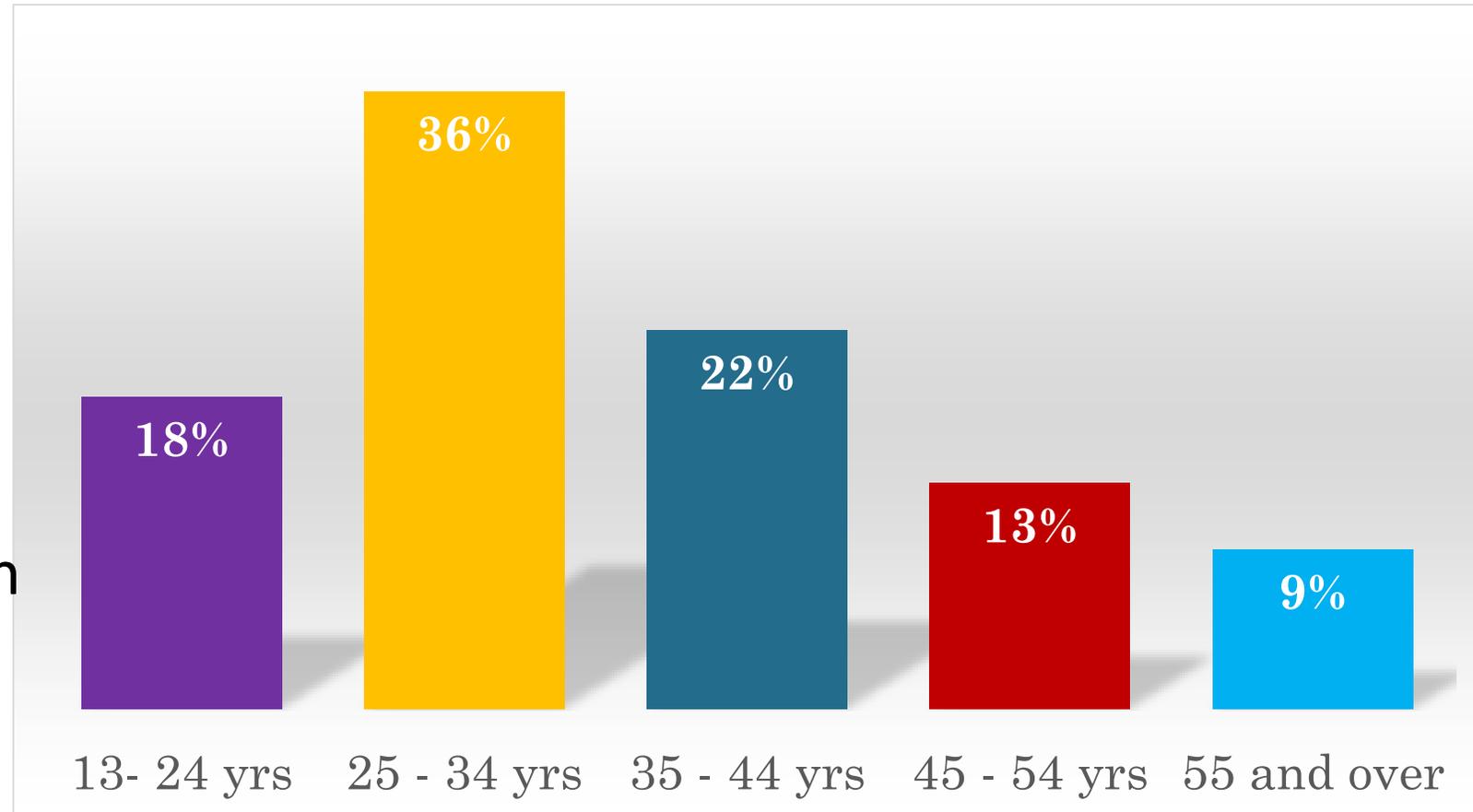
**New infections have  
start to stabilize  
in recent years**



Source: NC DHHS, HIV/STD Prevention and Care Unit, Mecklenburg County HIV Line List  
Prepared by Mecklenburg County Public Health, Epidemiology Program

# Diagnoses of HIV Infection among Adults and Adolescents by Age at Diagnosis, 2018—Mecklenburg County, NC N= 255

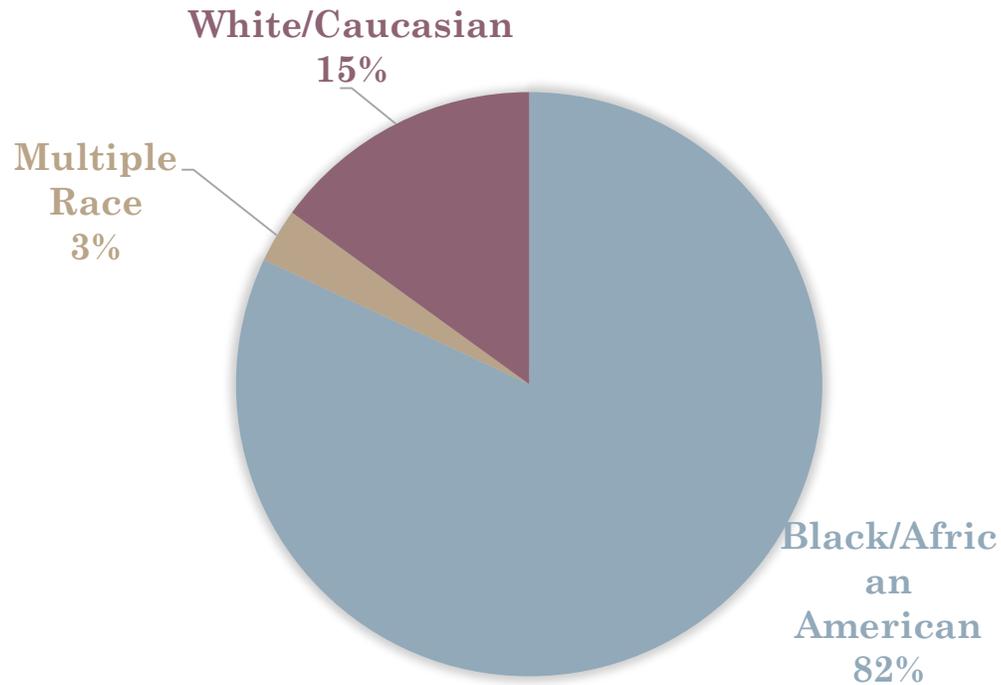
Similar to national trends,  
**Nearly 4 in 10 new HIV infections**  
occurred among  
persons 23 -34 yrs in  
Mecklenburg



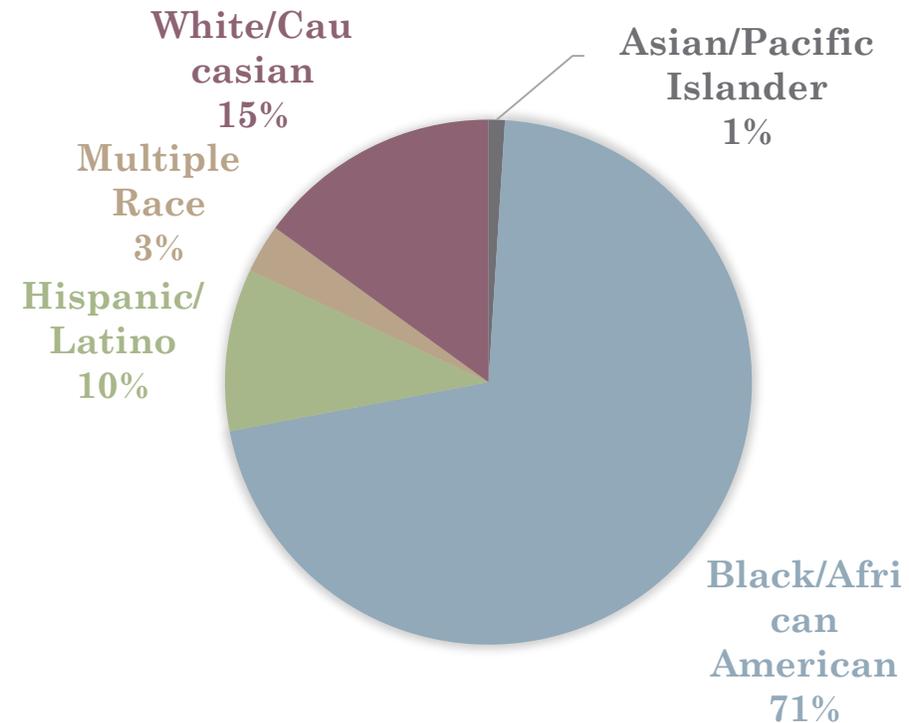
Source: NC DHHS, HIV/STD Prevention and Care Unit, Mecklenburg County HIV Line List  
Prepared by Mecklenburg County Public Health, Epidemiology Program

# Diagnoses of HIV Infection among Adults and Adolescents by Gender and Race/Ethnicity, 2018—Mecklenburg County, NC N= 255

**TOTAL FEMALE = 39**

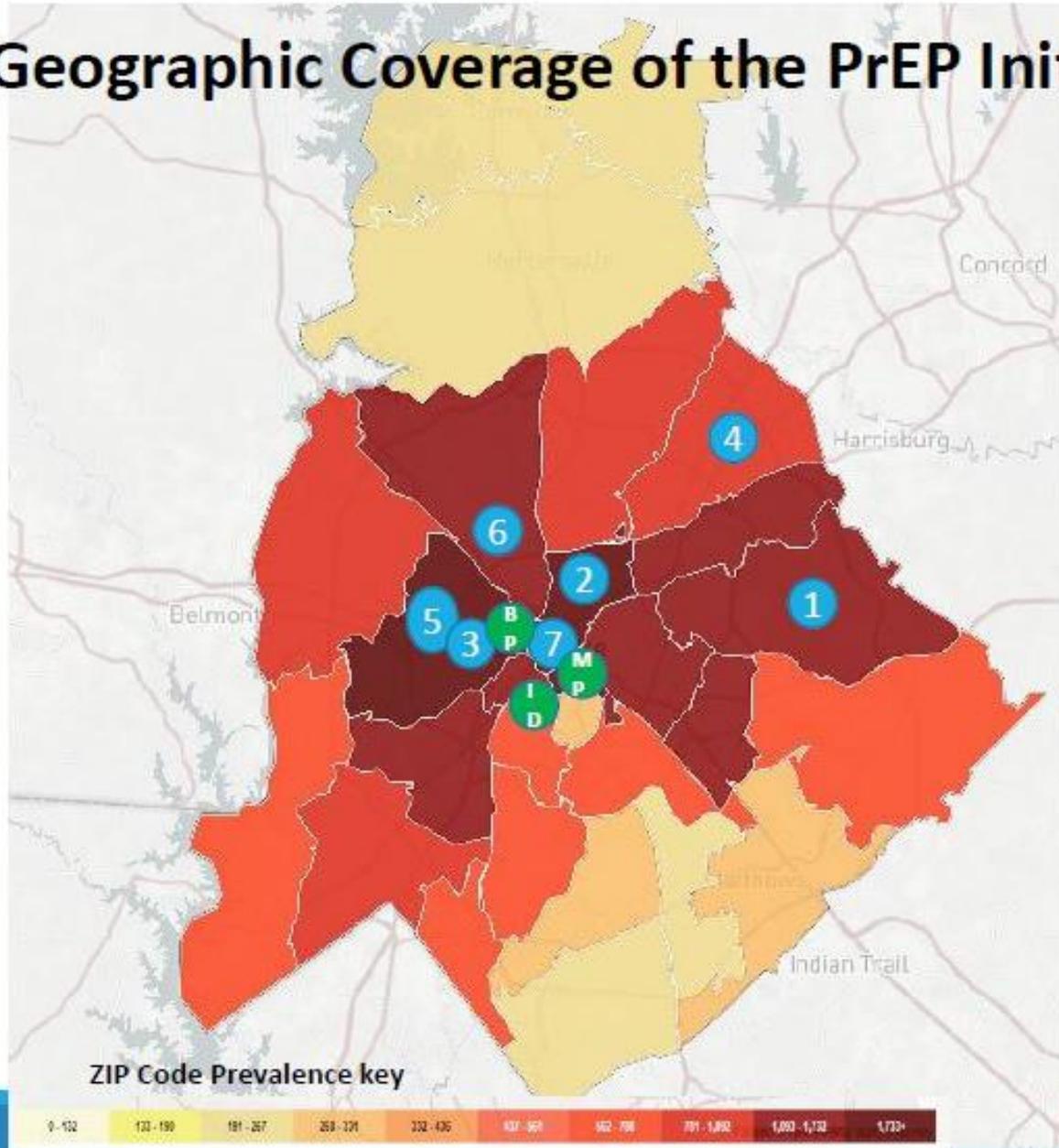


**TOTAL MALE = 216**



Source: NC DHHS, HIV/STD Prevention and Care Unit, Mecklenburg County HIV Line List  
Prepared by Mecklenburg County Public Health, Epidemiology Program

# Geographic Coverage of the PrEP Initiative



... then we added the location of the PrEP Initiative sites.

- Sites which have enrolled patients – 5Apr2020
- Newly joined sites – not yet seeing patients

*Source data of sites: Mecklenburg County Health Department*

Prevalence Map: AIDSVu; accessed 19Jun20:  
<https://aidsvu.org/local-data/united-states/south/north-carolina/charlotte/>

# PrEP Advertising

HAS ANYBODY  
*told*  
YOU ABOUT  
PREP?  
#704-432-TEST

 trendingtrent • Follow  
Charlotte, North Carolina

Visit MeckHealth.org for more information.  
#HIVawareness  
#doingitmeck #doingit  
#mecklenburgcounty  
#health #wellness  
#HIVtesting #PrEP  
#gettested  
#knowyourstatus  
#HIVprevention  
#704432TEST  
#meckcountyhealth  
@doingitmeck  
@mecklenburgcounty

5w

 darienisaac Love you for this cause you know a lot of us won't say a word about it 🌟

5w Reply

PRE-EXPOSURE  
PROPHYLAXIS,  
PREP  
BIG WORD, ONE SMALL PILL  
#704-432-TEST  
MECKHEALTH.ORG

 trendingtrent • Follow

more information.

#HIVawareness  
#doingitmeck #doingit  
#mecklenburgcounty  
#health #wellness  
#HIVtesting #PrEP  
#gettested  
#knowyourstatus  
#HIVprevention  
#704432TEST  
#meckcountyhealth  
@doingitmeck  
@mecklenburgcounty

6w

 onllysavon Smart move ! Know your status and openly talk about sex ! Communication is key !! 🌟🌟🌟🌟🌟

6w 1 like Reply

66 likes  
OCTOBER 17

# PrEP Advertising

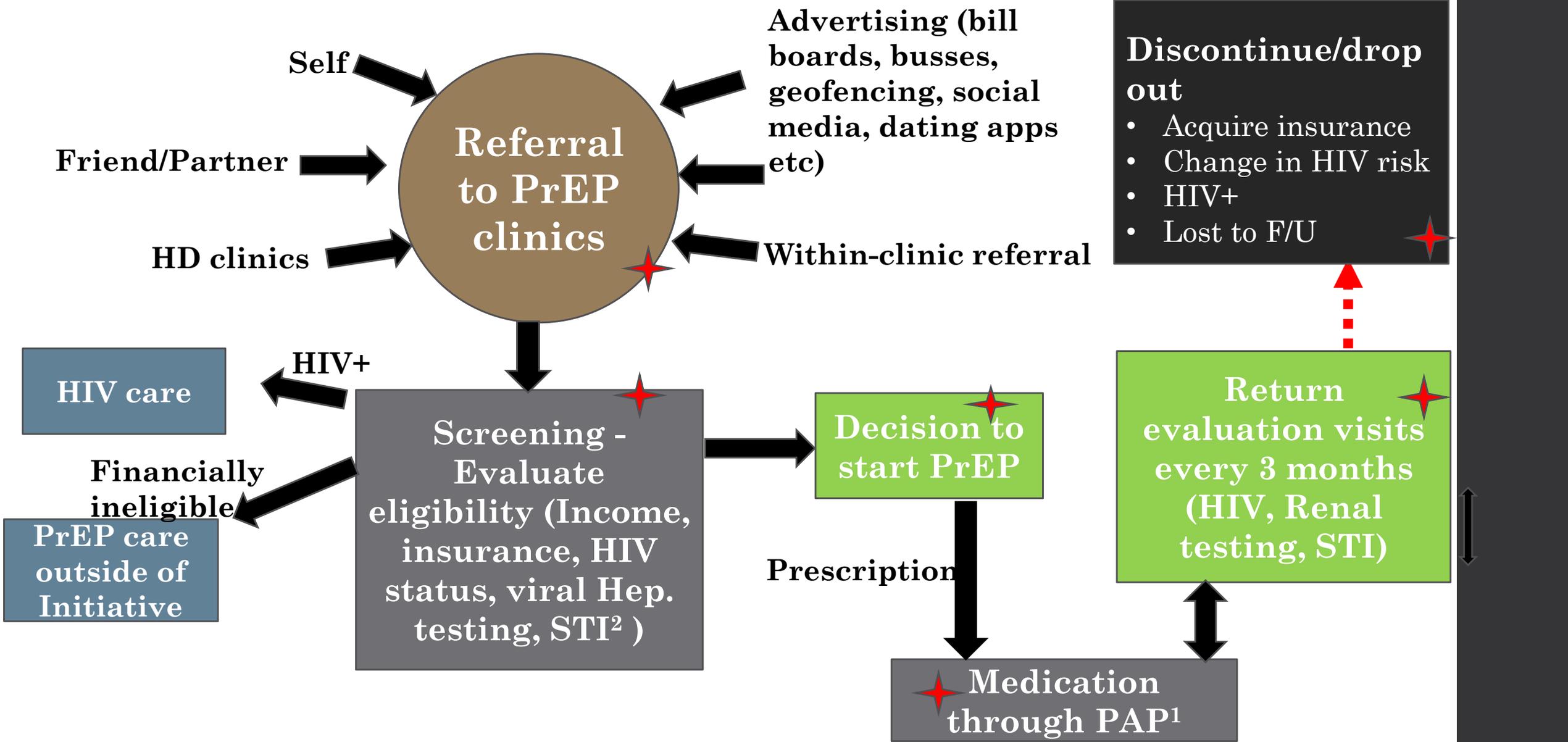


# PrEP Advertising



## Other advertising....

- Banners and posters at practices to increase awareness
- Active recruitment through dating apps



1. PAP: Gilead Patient Assistance Program
2. STI: Sexually Transmitted Illness *<sp>*testing and treatment

# Evaluation of the Initiative

- Conducted by APHI (UNCC-MCPH partners)
  - Use of standardized data collection forms (DCFs)
  - Protecting patient confidentiality – “anonymized” data collection
  - No personal health identifiers collected on DCFs
  - Unique ID numbers – patient ID key held at clinic sites
  - Monthly data collection and reporting

# Data Management

- Simple paper forms (DCFs) completed by hand
- Scanned and uploaded to secure site housed at MCPH
- Central data quality control and correction follow-up with sites
- Bi-monthly meetings with PrEP providers to review data and share best practices.

# Goals of Pilot Evaluation and Report (March 2018-March 2020)

Objective 1. Determine the public health/clinical effectiveness

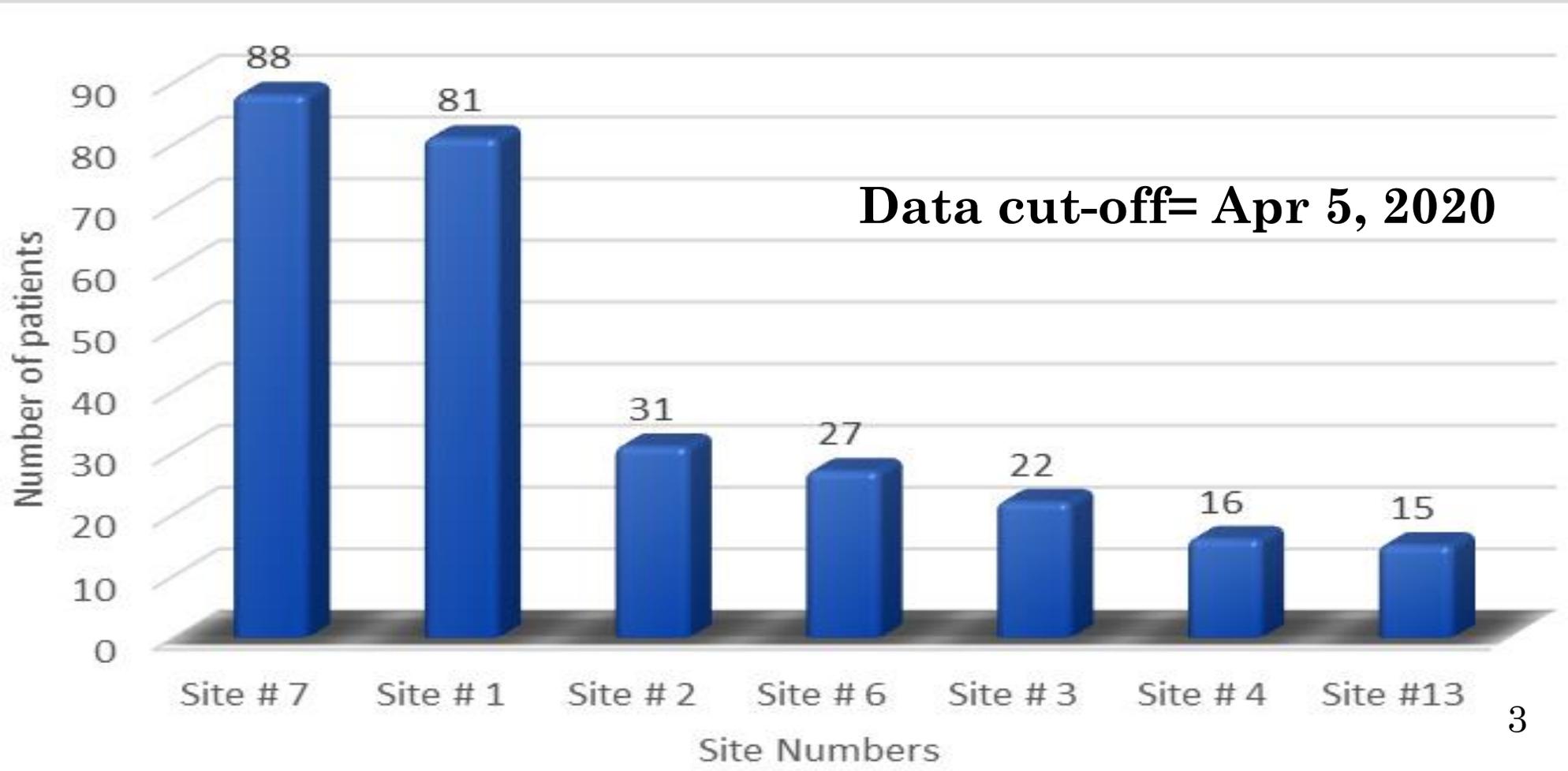
- # patients entering PrEP and their characteristics
- Retention of patients
- New HIV infections; sexually transmitted illnesses (STIs)
- Adverse events (AEs) possibly related to PrEP

Objective 2. Determine whether the PrEP Pilot effectively reached priority uninsured populations

# The Numbers, as of 2 years...

- Number Screened: 290
  - Started PrEP: 280
- Number who discontinued: 84 (30%)
  - Due to possibly related AE: 2
  - Obtained insurance: 11 (included in 84)
  - Presumed lost to F/U\*: 39 (included)
- Average duration on PrEP: 8.3 months(s.d. 6.2 mo)
  - Range: 1 day to 23.5 mo
- HIV infection while on PrEP:0

# Numbers of patients who started PrEP for each site (N=280)



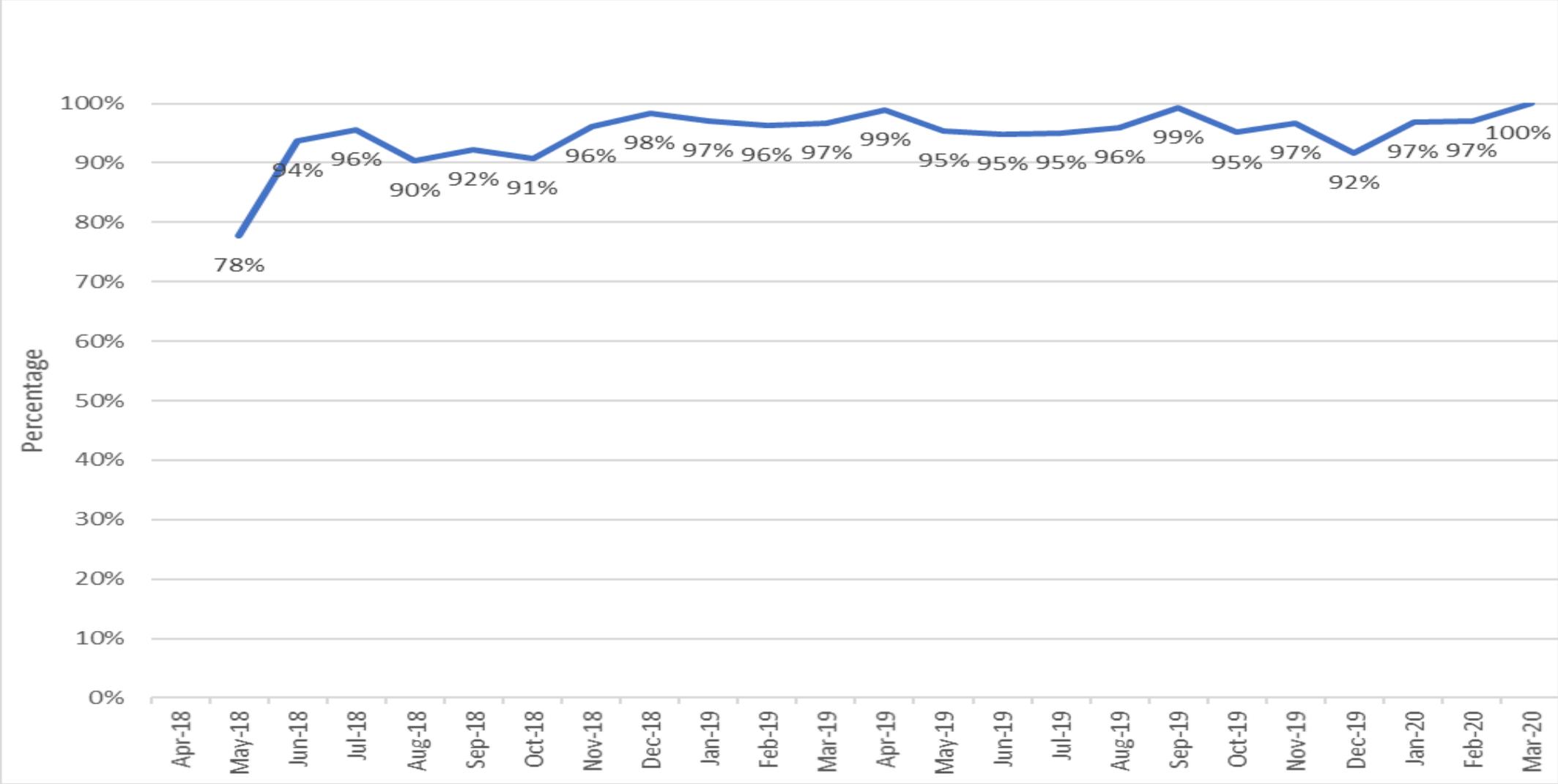
# Gender and Race Ethnicity – Persons starting PrEP

CHARACTERISTICS	% (n=280)
Gender	
Male	84.6% (237)
Female	15.4% (43)
Race/Ethnicity	
Black African Amer	50.4% (141)
Hispanic	27.1% (76)
White	17.9% (50)
Asian	1.4% (4)
Race Other/Unk	3.2% (9)

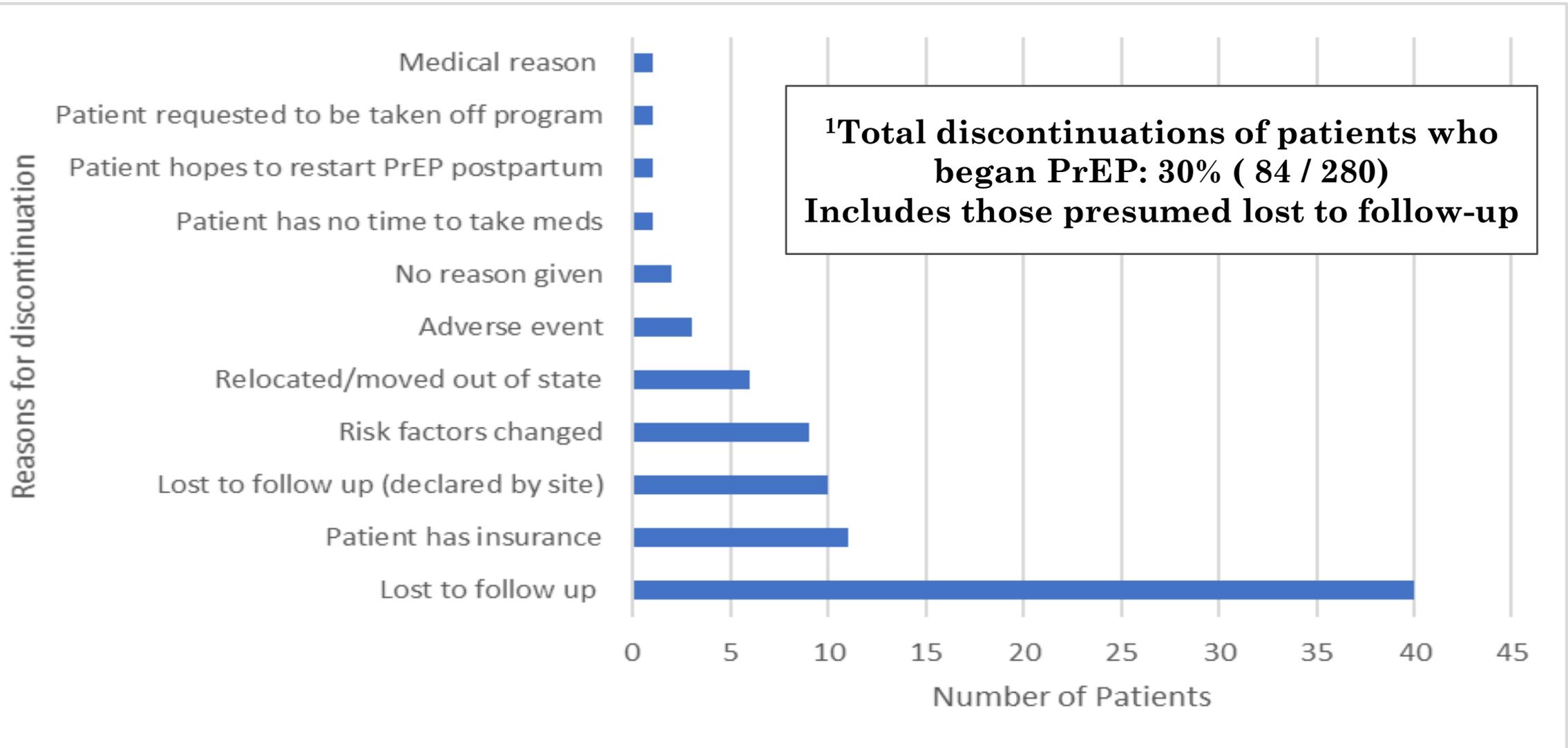
# Transmission Risk Factors – Persons starting PrEP

CHARACTERISTICS	% (n=280)
Risk Factors*	
MSM	68.6% (192)
HIV+ sexual partner	24% (68)
Multiple sexual partners	16.4% (46)
Inconsistent condom use	55% (154)
Commercial sex worker	2.5% (7)
HIV prevalent Network	4.6% (13)
Bacterial STI	3.9% (11)
Other	6.4% (18)

# Month-by Month Patient Retention in PrEP Initiative



# Reasons for Discontinuation<sup>1</sup> from PrEP Initiative

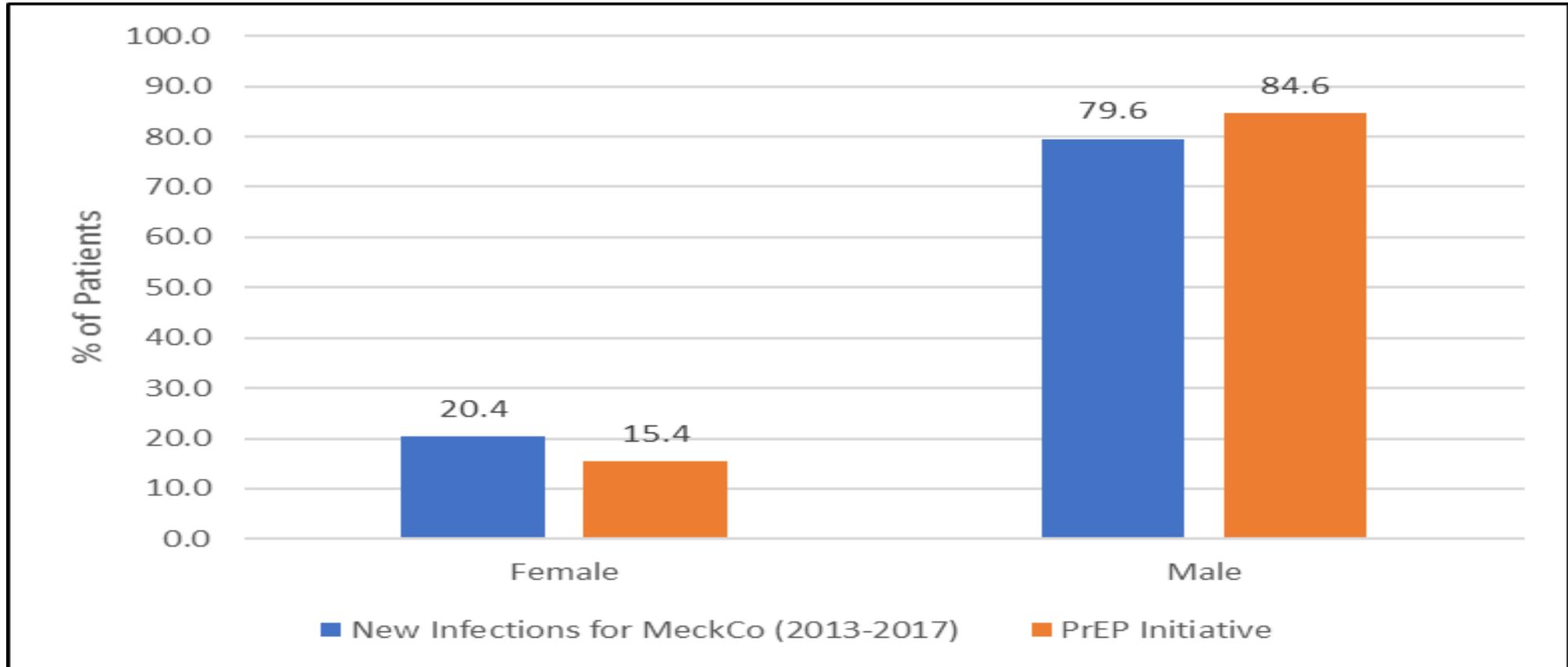


**Objective 2. Determine whether the PrEP**

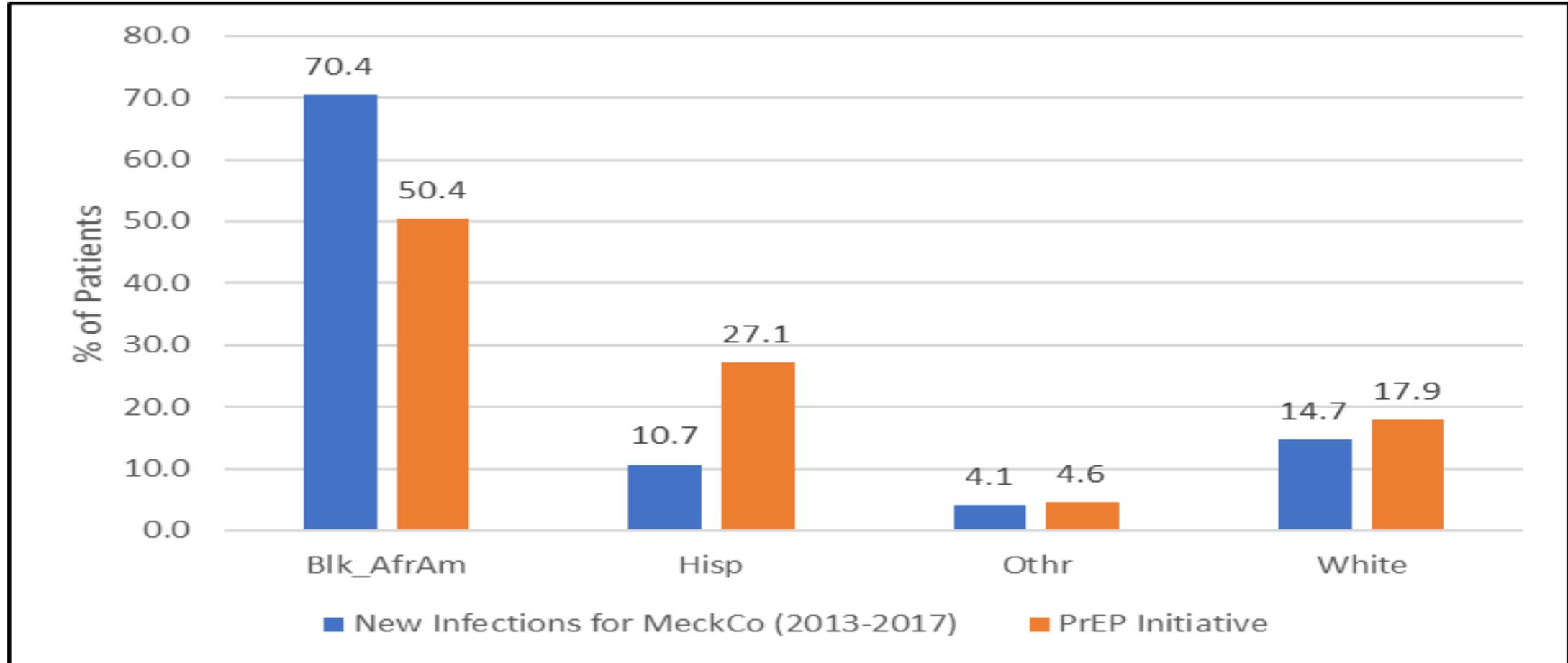
**Initiative effectively reached the priority**

**populations**

# % patients according to gender - PrEP Initiative vs New HIV infections (MeckCo. Residents 2013-2017)



# % patients according to race-ethnicity - PrEP Initiative vs New HIV infections (in MeckCo Residents 2013-2017)

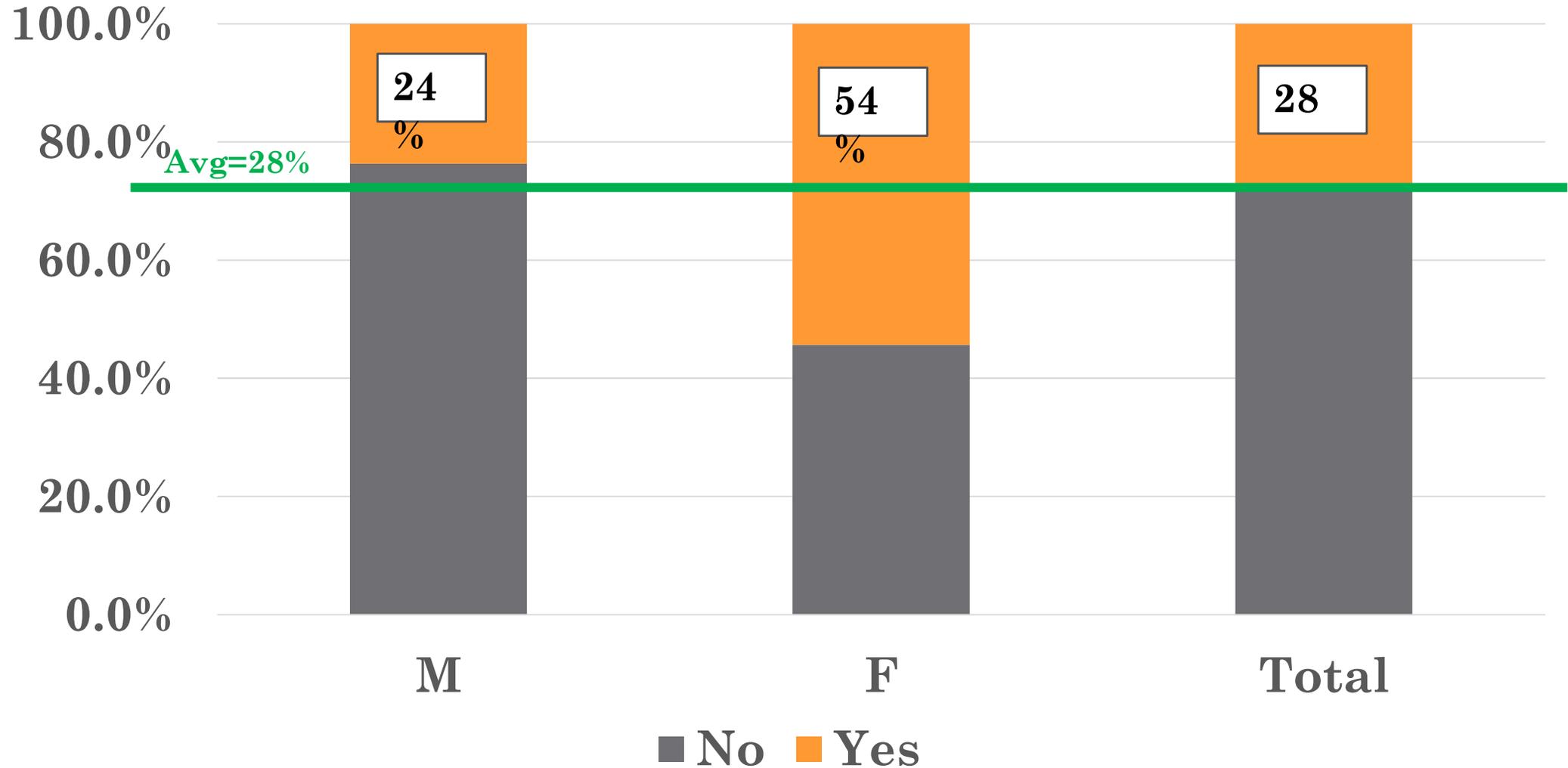


# Lost to follow-up (based on July 5 cut-off)\*

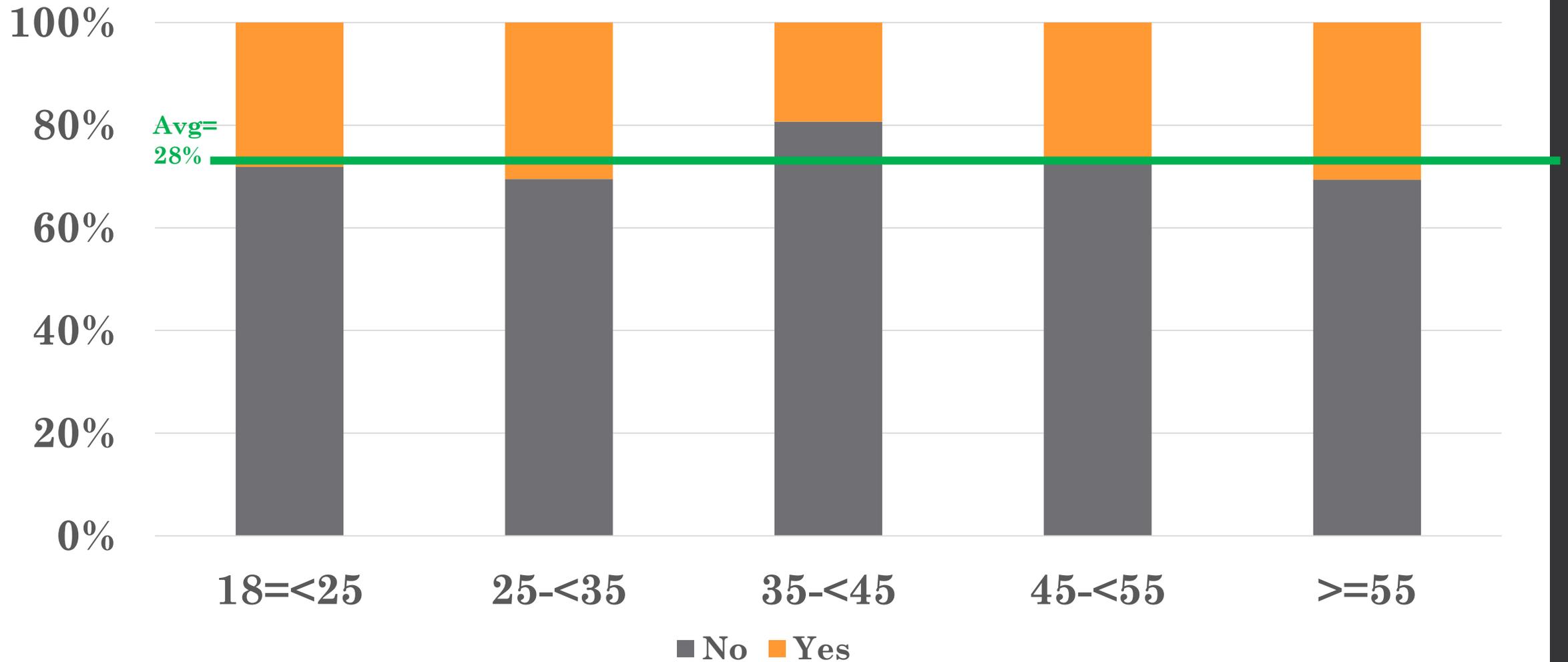
- Started PrEP and had a V99= “Lost to follow-up” or no visit for 6 months or more ( $\geq 183$  days)
  - Does not include all D/Cs
- Total number “Started and then Lost”: 92 patients
  - 28% of 330 patients who started PrEP
- Characteristics associated with lost to follow-up?

\* Does not include patients reported by site since July 20

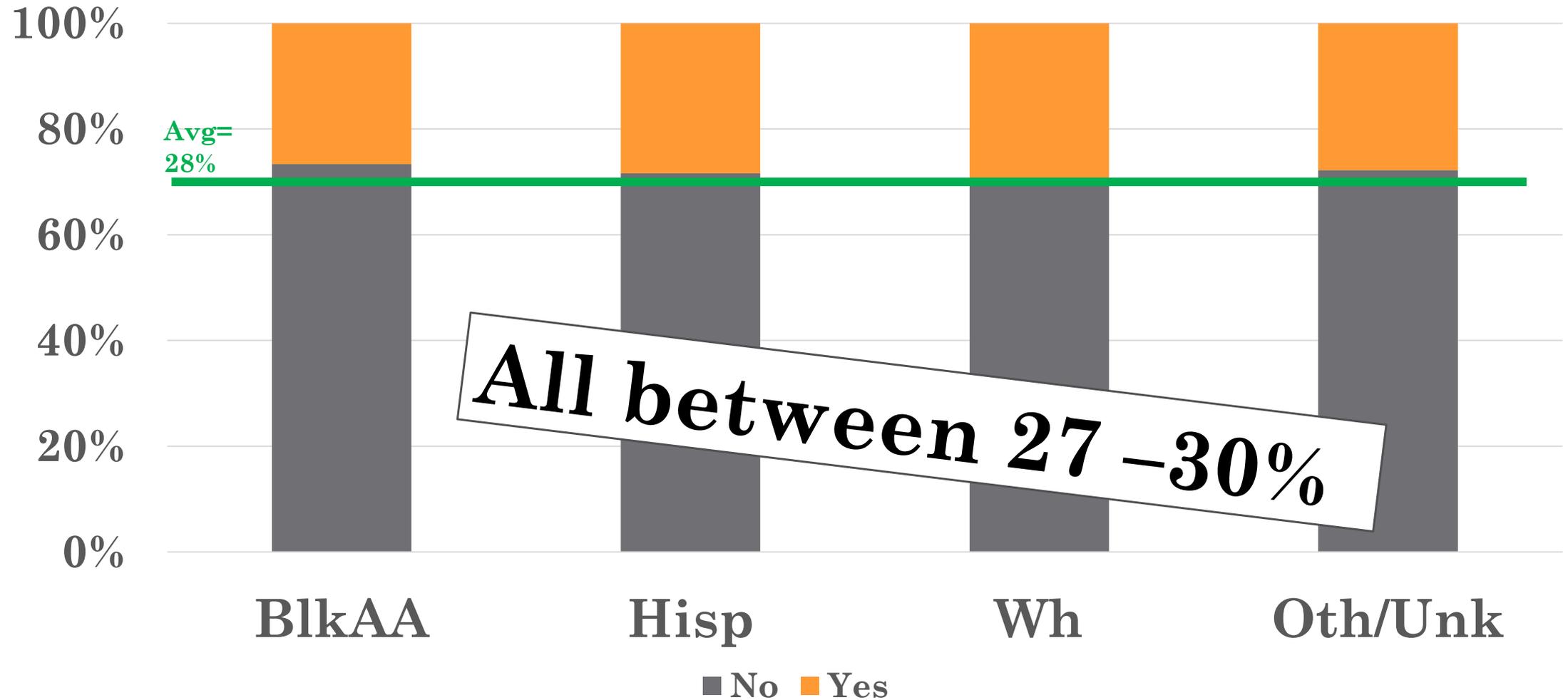
# Lost to F/U - Pts who Started PrEP - Gender @ Birth



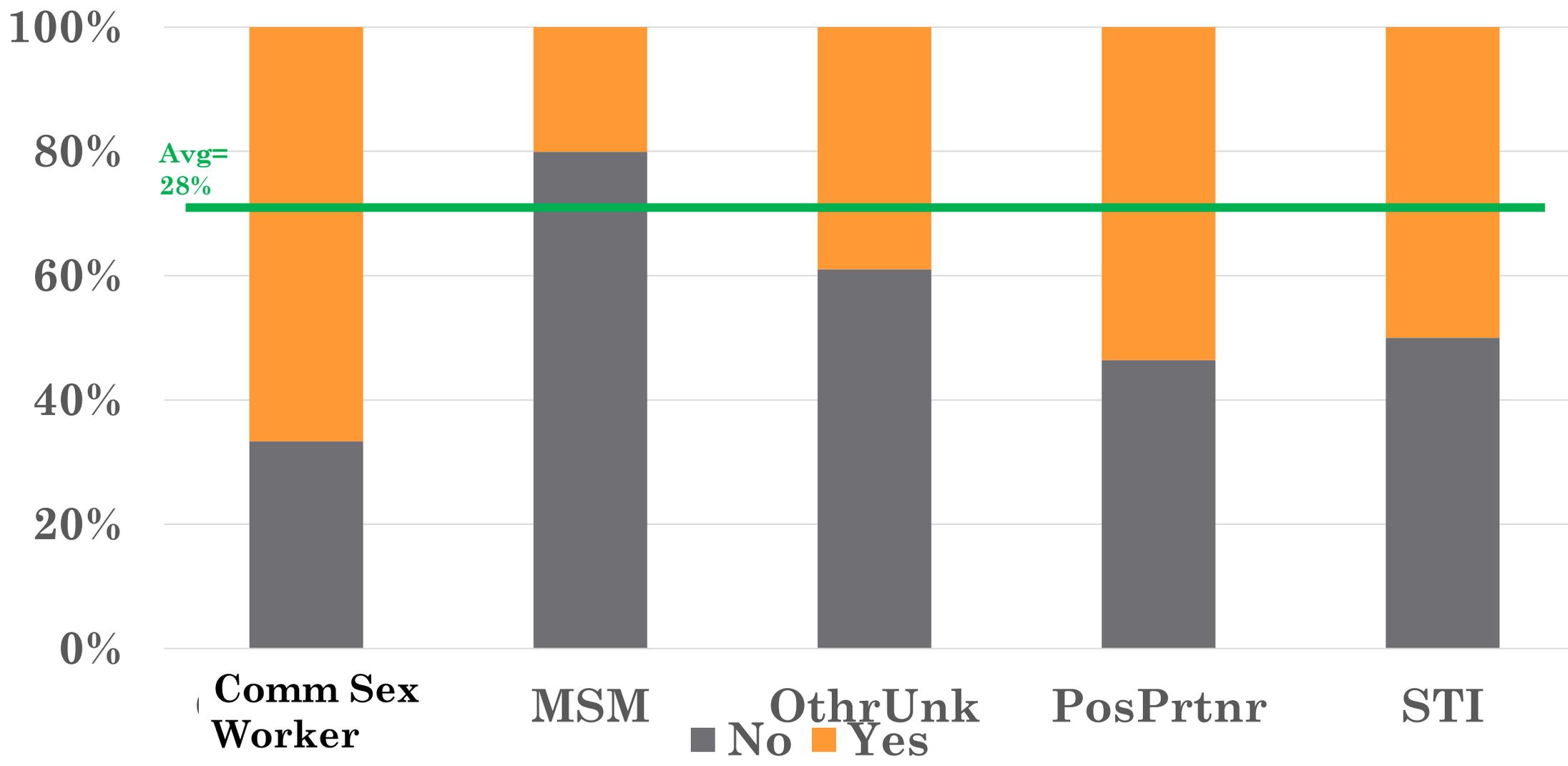
# Lost to F/U - Pts who Started PrEP - Age Grp



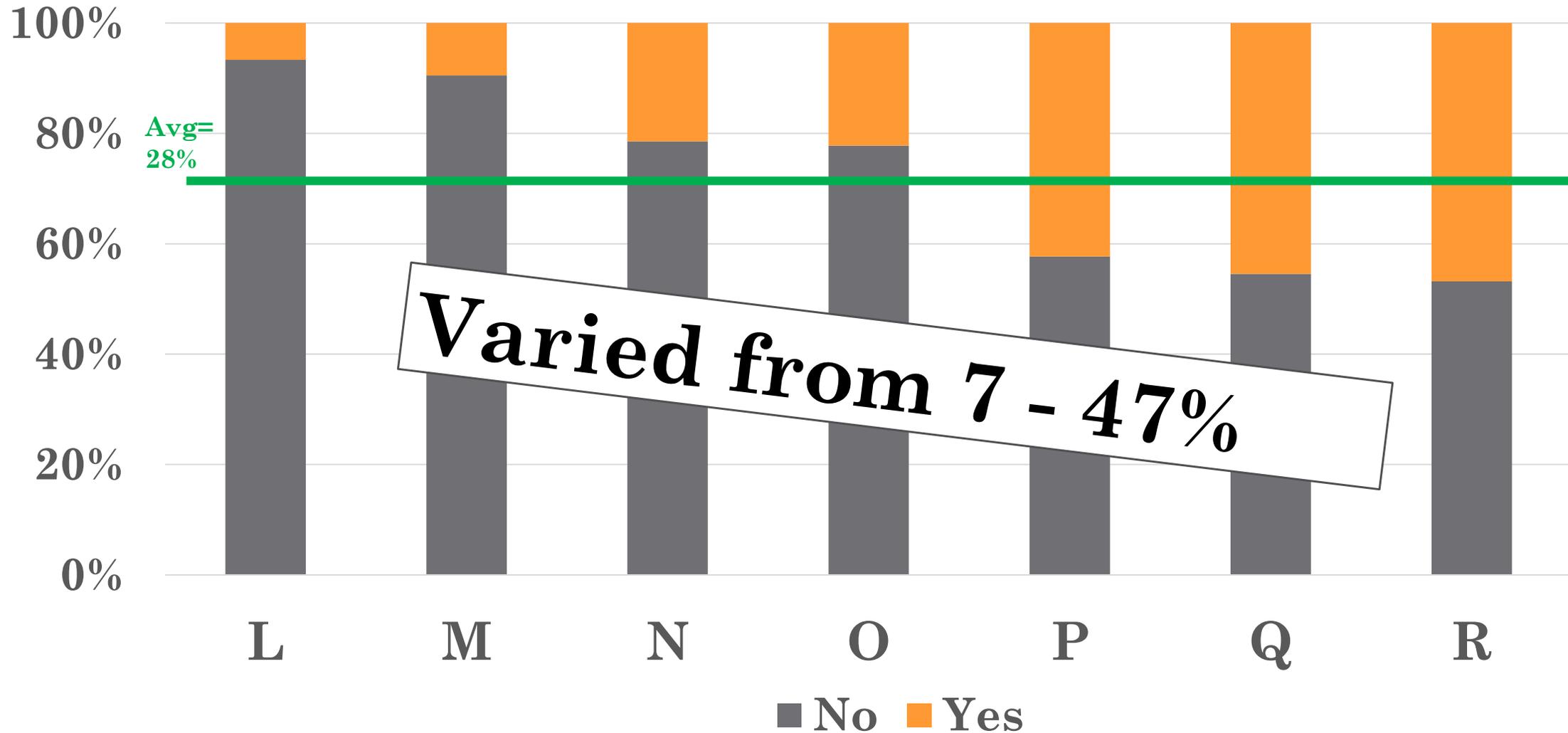
# Lost to F/U - Pts who Started PrEP - Race/Ethn



# Lost to F/U - Pts who Started PrEP - Transmission Risk



# Lost to F/U - Pts who Started PrEP - Site (randomly coded)



# Possible Associations with Loss to Follow-up

Characteristic	Group(s)	Association with LTFU
Gender	Women	Importantly high %
Age	Variable by age group	Very modest
Race/Ethnicity	none apparent	--
HIV risk factors	Non-MSM*	Relatively high %
	MSM	Relatively low %
Clinic site	Varies among clinics	Large variations

\* Includes commercial sex workers, persons with positive partners, with STIs, other/unknown factors

# Conclusions

- No HIV infections in patients on PrEP
- Recruitment continues at a steady pace
- Screening: HIV infections referred for treatment
- Advertising through dating apps very effective
- Time from 1<sup>st</sup> visit to start of PrEP – desirably short time
- Retention generally good – monitor for LTFU
- PrEP Initiative will continue; expand with Ending the HIV Epidemic CDC award.

# Acknowledgements

- Mecklenburg County leadership
  - PrEP Initiative Providers
- Academy for Population Health Innovation (APHI)\*
  - Mecklenburg County Public Health HIV/STI team
- \* a collaboration between University of North Carolina at Charlotte and Mecklenburg County Public Health