

District Health Board

Te Poari Hauora ō Waitaha

An Information sheet: Ongoing monitoring for patients on PrEP

This information sheet has been designed to assist you, the GP prescribing PrEP, with the **ongoing follow-up requirements** for the person taking PrEP. For further information refer to https://www.pharmac.govt.nz/medicines/my-medicine-has-changed/prep-for-hiv/ or https://www.ashm.org.au/HIV/PrEP/. Once a patient is commenced on PrEP it is **essential** they are followed up 3 monthly, prior to the next prescription being issued. This evaluation will vary slightly over the 12 month period, and is outlined below to assist you in navigating this.

Clinical follow-up & patient education

Points to cover include;

- Whether the patient meets Special Authority criteria for *renewal* of PrEP.
- Assessment for signs of acute HIV infection.
- Adherence to regimen.
- Condom use.
- Evaluation of side-effects.
- Prevention of HIV and other STI's, and how to reduce those risks (including the use of recreational drugs).
- Emphasise smoking cessation and safe alcohol use (if applicable), as these factors are linked with osteoporosis, as is Tenofovir.
- Refer to Health Info on Reducing your risk of osteoporosis

Laboratory evaluation and Lab testing

Testing for HIV, syphilis, and a full STI screen needs to have occurred in the previous two weeks

Test		3 months after initiation	Every 3 months while on PrEP	Every 6 months while on PrEP	Annually
HIV testing		✓	✓		
Hepatitis C serology					✓
STI screen Ensure all applicable sites tested (pharyngeal, rectal, and urine NAT)	Syphilis serology	✓	✓		
	Gonorrhoea	✓	✓		
	Chlamydia	√	√		
Complete Blood Count (CBC)				✓	
Liver Function Tests (LFT's)				✓	
*Phosphate		✓			✓
HbA1c		✓			✓
**eGFR and protein/creatinine ratio (urinary)		✓		✓	
Pregnancy test		✓	✓		

^{*} If phosphate is below the normal range then repeat. If persistently low consider urinary phosphate measurement and discussion with Infectious Diseases or Sexual Health.

This information sheet is for the use of the ongoing PrEP prescriber.

^{**} A rise in serum creatinine is not a reason to withhold treatment if the eGFR remains ≥60 mL/min/1.73 m2