



# PrEP (Pre-exposure prophylaxis) vs nPEP (non-occupational Post-exposure prophylaxis)

## PrEP

### What is PrEP?

Pre-exposure prophylaxis (PrEP) is a new HIV prevention method. People who are on PrEP use anti-HIV medications **before (as well as after)** they are exposed to HIV, in order to prevent infection.

### What's In It?

Currently, PrEP is a single drug (Truvada) that combines two anti-HIV medications: tenofovir disoproxil fumarate and emtricitabine. In the future, there will also likely be other drug options.

### Is PrEP for Me?

PrEP is for people who expect to be at ongoing risk of HIV infection **in the future**. You must be able to take a pill every day, and to stay in regular medical care. The CDC recommends considering PrEP for many HIV-negative people who:

- Have sexual partners who are or might be HIV-positive
- Have sex without condoms with partners who might have HIV
- Have had STDs, injected drugs, or shared equipment in the last 6 months.

### How Well Does PrEP Work?

Studies suggest that PrEP can reduce a person's chances of getting HIV by as much as 92%—if it is taken consistently. It is **much** less effective if it isn't taken consistently. It's not a guarantee that you won't get infected. Your chances of avoiding HIV go way up if you use other prevention methods too—like condoms, and if you test for and treat STDs.

### But Is It Safe?

The FDA approved Truvada for PrEP use in 2012, and it has been used to treat people living with HIV since 2004. No serious side effects were observed in PrEP clinical studies. Some people had an upset stomach, or loss of appetite or got headaches.

Some had slight, temporary changes in kidney function and bone mineral density. We don't know the side-effects of taking PrEP for 20 or 30 years. You'll be tested for HIV before starting PrEP, because PrEP doesn't work (and could cause harm such as drug-resistance) in HIV-positive people.

### How Long Would I Have to Take It?

You can stop taking PrEP at any time, but for the best protection against HIV, it's recommended that you take it for about 3 weeks before any HIV exposures, and about one month after. Talk with your doctor about what's right for you.

### Where Can I Find It?

Truvada can be prescribed by your doctor. It is covered by many insurance programs and the ACA, but may require pre-authorization from a doctor. Patient assistance programs are also available. Many agencies also have "PrEP Navigators" who can help. Talk to your doctor to see if PrEP should be part of your HIV prevention toolkit.

## nPEP

### What is nPEP?

Post-exposure prophylaxis (PEP) uses anti-HIV medication as an emergency measure to help prevent HIV within 72 hours **after** an exposure to the virus. nPEP refers to **non-occupational** (outside of work) exposure—it is for people who were exposed, for example, through sexual contact or shared injection equipment.

### What's In It?

Different medications can be used in nPEP (usually includes a combination of two or three anti-HIV drugs). Currently, two NRTIs (nucleoside analogue reverse transcriptase inhibitors) are used, and sometimes a third NRTI or protease inhibitor is as well.

### Is nPEP for me?

nPEP can only work if started within 72 hours after exposure. You must be able to take HIV medications every day for four weeks, and have your care monitored by a doctor. nPEP may be a good choice for people who have had **an exposure that is unusual for them** (unprotected sex, needle sharing, sexual assault, or another one-time exposure). If you have ongoing risk for HIV, the CDC recommends PrEP as a better choice.

### How Well Does nPEP Work?

Although it works in many cases, there is less evidence for the effectiveness of nPEP in preventing HIV infections after an exposure than there is for PrEP preventing HIV before one. The sooner a person starts nPEP, the better the chances HIV will be prevented from making copies of itself in the body.

### Is It Safe?

The medicines in nPEP often cause more and stronger side effects than PrEP does, such as diarrhea, nausea, vomiting, and fatigue. nPEP may cause drug-resistance in people who do become HIV-positive from their exposure. You'll be tested for HIV before starting nPEP.

### How Long Would I Have to Take It?

For the best protection against HIV, you would need to start nPEP within 72 hours after an exposure (but even sooner than that is better) and take it for 28 days. Talk with your doctor about what's right for you.

### Where Can I Find It?

You can ask your doctor, your local emergency room, urgent care, or HIV medical clinic about nPEP. The medical provider there will ask questions to assess if nPEP could be the right choice for you. Some insurance plans cover nPEP, and some patient assistance programs also exist.

UCSF HIV Capacity-Building Assistance Collaboration:

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This fact sheet was produced by the UCSF Alliance Health Project, Box 0884, San Francisco, CA 94143-0884, 415-476-4455.