

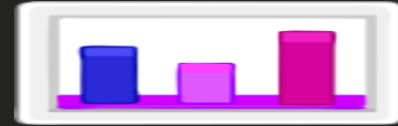
PrEP In France

AIDES' view of things

date

Overview

1. How did we get there?
2. Roll out : figures,
3. Roll out : problem areas,
4. Roll out : work in progress



TITRE DE LA PRÉSENTATION

1. How did ‘we’ get there ?

A ‘*savant-mélange*’ of community engagement and mobilization, participation in research and advocacy and lobbying

- Mobilization through social networks: **FreePrepNow and Prepdial are just two examples of this.**
- Ipergay study – findings showed :
 - **Event-driven regimen of PrEP “worked”**
 - **The central role of peer support in observance**
- Flash! Prep study 2014 France
 - **Highlighting interest and intention to use PrEP in MSM and other key populations**
- Concerted/coordinated advocacy and lobbying :
 - **Participation in Morlat Report 2015 (French recommendations)**
 - **The French Public Health Law 2015**
 - **The PrEP manifesto (with EATG)**

FAQ about PrEP in France

Question	Answer
How did PrEP get started in France?	AIDES submitted a request for a temporary recommendation for use (RTU) to the Agence Nationale de Sécurité du Médicament (ANSM; the French National Agency for Drug and Health Product Safety) in 2013. The request led to an RTU, which was published in December 2015. PrEP has been accessible in France since January 2016.
What is the current legal framework for PrEP access?	RTUs regulate the prescribing of drugs pending their marketing authorisation (AMM). For an RTU to be issued, the following two conditions must be met: <ul style="list-style-type: none"> • There is an unmet therapeutic need; and • The drug's risk/benefit ratio is assumed to be favourable, in particular, based on published scientific efficacy and tolerance data. RTUs are valid for a maximum of 3 years and are renewable. Their purpose is to ensure safe drug use through the implementation of patient monitoring, organised by the pharmaceutical companies concerned in conjunction with the prescribing physicians. The RTU defines the practical prescribing conditions: by whom, for whom, how, etc.
How was the RTU obtained?	Authorisation of PrEP was made possible by the confluence of several aligned factors over the previous 3 years: <ol style="list-style-type: none"> 1. Recognising that there was a problem. Given: <ul style="list-style-type: none"> • the incidence of HIV in MSM, • the steady decline in systematic condom use in HIV-negative MSM, and • the still-insufficient participation in early screening, it became apparent that PrEP had to be added to the array of prevention tools, since TasP effect was insufficient in curtailing the epidemic (see 2014 projections in this regard). 2. With a paradigm shift, PrEP became an acceptable strategy: <ul style="list-style-type: none"> • AIDES participated in the ANRS-Ipergay trial by recruiting participants and supporting them throughout the trial; • PrEP was authorised in the U.S.; • Informing those people potentially interested in PrEP ; • Discussions held with all the stakeholders in the fight against AIDS; • Strong interorganisational networking; • Serious involvement by AIDES in the national expert recommendations; • Knowledge and desirability of this new prevention tool in the main populations for AIDS transmission determined by an AIDES survey, FlashPrEP; 3. Putting the issue on the agenda, thanks to several seized opportunities: <ul style="list-style-type: none"> • Organising of the ANRS Ipergay trial;



Roll-Out: figures

- Recommendation for Temporary Use as of the 1 of January 2016.
- At the beginning of September **1, 527** were taking PrEP
- Vast majority of these are MSM and in Paris
- **50 000** is the target.



Roll-Out : Problem areas

- Support (including peer) is not present in all consultations :
 - Despite the recommendations as crucial for observance with vulnerable populations
 - Support is 'costly' (time, money etc)
- Hospital Consultations inadapted to needs
 - E.g. Thursdays 2.00 – 3.30 pm = having to justify taking time off work, every three months.
- Attitudes of some health professionals
 - Judgemental attitudes, being over restrictive, over-postponing enrolment
- Uptake outside of Paris region:
 - Populations
 - Hospital consultations
- Getting PrEP to non-MSM at-risk populations



Roll-Out: Work in progress

- Getting PrEP to those that need it, France:
 - Santé Publique France and Paris sans Sida
 - Prescription by GPs, health centres, community health providers
 - Targeted information of communities (Trans, Migrant, women)
 - Pharmacy access
 - Research Study PREVENIR
 - Exposing and denouncing mal practice
- Getting PrEP to those that need it Europe.
 - Coordination of Flash! PrEP In Europe research (results pending)



PrEP IS ONE MORE TOOL AMONG MANY OTHERS !





SOME RESOURCES

- Guide : « Prep , how to use it ? (16 pages in french, available on order) : documentation@aides.org
- Website : www.prep-info.fr
- Exchange group among PrEP users (in French) on Facebook : www.facebook.com/groups/prepdial
- Site www.prepwatch.org about PrEP all over the world
- ANRS-IPERGAY : www.ipergay.fr
- WHO site : www.who.int

Thank you for your attention

Contacts:

Christian Verger cverger@aides.org

Richard Stranz rstranz@aides.org

NOUS RENCONTRER

Tour Essor
14 rue Scandicci
93508 Pantin CEDEX

NOUS CONTACTER

0801 160 011
(gratuit depuis un fixe)

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FB : aides
TW : @assoAIDES

www.aides.org

