

This fact sheet explains the U.S. Preventive Services Task Force's (Task Force) draft recommendation statement on pre-exposure prophylaxis for the prevention of HIV infection. It also tells you how you can send comments about the draft recommendation to the Task Force. Comments may be submitted from November 20, 2018 to December 26, 2018. The Task Force welcomes your comments.

## Pre-Exposure Prophylaxis for the Prevention of HIV Infection

The Task Force has issued a **draft recommendation statement** on *Pre-Exposure Prophylaxis for the Prevention of HIV Infection*. The Task Force found that pre-exposure prophylaxis, commonly referred to as PrEP, is very

effective at preventing HIV among people at high risk, when taken daily. The Task Force recommends that clinicians offer PrEP to patients who are at high risk for HIV.

What is pre-exposure prophylaxis?

For the prevention of HIV, pre-exposure prophylaxis, or PrEP, is taking a pill daily to reduce the chance of getting HIV.

### Facts about HIV and PrEP to Prevent HIV Infection

HIV is a virus that attacks cells that help the body fight infection. This makes a person vulnerable to other infections and diseases. HIV is spread mainly through having sex without a condom or sharing drug needles with someone who has HIV. Less commonly, a woman with HIV can transmit the virus to her baby. If left untreated, HIV can cause serious illness and even death.

PrEP is a way to prevent HIV by taking a pill every day before coming in contact with HIV to reduce the chance of becoming infected. PrEP is not for everyone. PrEP is only for people who do not have HIV and are at high risk of getting HIV. Those at high risk for HIV include people who do not always use condoms and have sex with partners who are at high risk, and people who share injection drug needles. Clinicians should talk with all patients about their sexual and injection drug history to figure out which patients might benefit from PrEP.

The only FDA-approved medicine for HIV PrEP is a combination of two medicines called tenofovir and emtricitabine. Tenofovir alone has also been found to be an effective PrEP medicine for some people at high risk for HIV.

PrEP helps prevent HIV, but not other sexually transmitted infections. People who take PrEP should continue to use condoms and practice other behaviors to reduce the risk of other sexually transmitted infections.

Taking PrEP is one way to lower the risk of getting HIV. Other ways include always using condoms and, for people who inject drugs, using clean needles.

### Potential Benefits and Harms of Pre-Exposure Prophylaxis for the Prevention of HIV Infection

The Task Force looked at the benefits and harms of PrEP for the prevention of HIV infection. For people who are at high risk for HIV, they found the benefits of preventing HIV infections using PrEP far outweigh possible harms from PrEP. When taken daily, PrEP is very effective at preventing HIV. However, like many medicines, if not taken as prescribed, PrEP is less effective at preventing HIV. This is why it's important that people who take PrEP take it daily.

The Task Force found that harms of PrEP include kidney problems and nausea. These problems are often not serious and usually resolve over time or after PrEP is stopped.

## The Draft Recommendation on Pre-Exposure Prophylaxis for the Prevention of HIV Infection

Here is the Task Force's draft recommendation on PrEP for the prevention of HIV infection. It is based on the quality and strength of the evidence about the potential benefits and harms. It is also based on the size of the potential benefits and harms. Task Force recommendation grades are explained in the box at the end of this fact sheet.

When the Task Force issues a **Grade A**, it recommends the preventive service because it has more potential benefits than harms.

Before you send comments to the Task Force, you may want to read the [draft recommendation statement](#). The recommendation statement explains the evidence the Task Force reviewed and how it decided on the grade. An [evidence document](#) provides more detail about the scientific studies the Task Force reviewed.

**1** The USPSTF recommends that clinicians offer [pre-exposure prophylaxis](#) with effective [antiretroviral therapy](#) to persons who are at [high risk](#) of HIV infection. **(A Recommendation)**

### Notes

**1** [pre-exposure prophylaxis](#)  
For the prevention of HIV, taking a pill daily before coming in contact with HIV to reduce the chance of becoming infected.

[antiretroviral therapy](#)  
For the prevention of HIV, medication that can stop an HIV infection that's been introduced into the body from taking hold. Similar medication is used for treatment of HIV.

[high risk](#)  
Behaviors and factors that can put people at high risk for HIV are:

- having a sex partner who is HIV positive
- having sex without a condom with a partner whose HIV status is unknown and who is at high risk for HIV
- recently having a sexually transmitted infection
- sharing drug injection needles and syringes
- exchanging sex for drugs or money

## What is the U.S. Preventive Services Task Force?

The Task Force is an independent, volunteer group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services, such as screenings, counseling services, and preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a **draft recommendation statement**. All comments are reviewed and considered in developing the final recommendation statement. To learn more, visit the [Task Force Web site](#).

### USPSTF Recommendation Grades

Grade	Definition
A	Recommended.
B	Recommended.
C	Recommendation depends on the patient's situation.
D	Not recommended.
I statement	There is not enough evidence to make a recommendation.

### Click Here to Learn More about HIV

- Facts About PrEP**  
(Centers for Disease Control and Prevention)
- Overview of Pre-Exposure Prophylaxis**  
(HIV.gov)
- Understanding Pre-Exposure Prophylaxis**  
(National Institutes of Health)

## Click Here to Comment on the Draft Recommendation



The Task Force welcomes comments on this draft recommendation.



Comments must be received between November 20, 2018 and December 26, 2018.



All comments will be considered for use in writing final recommendations.