

# HIV Post-Exposure Prophylaxis (PEP)

## A Guide for Sexual Assault Advocates & Survivors

Part of comprehensive and healing care following a sexual assault is minimizing risk of pregnancy and sexual transmitted infections. Information about HIV prevention medication has changed over the years. This guide is intended to offer survivors and advocates updated information, but reach out to HIV prevention specialists and service providers like Health Equity Alliance and the Maine CDC for on-going training.

## HIV

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HIV, or human immunodeficiency virus, attacks the body's immune system and if left undiagnosed and untreated can lead to illness and death. HIV is transmitted through 5 body fluids: blood, semen, vaginal fluids, rectal fluids, and breast milk. People living with HIV who stay on treatment can live long, full lives.

## Post-Exposure Prophylaxis (PEP)

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Post-exposure prophylaxis (PEP) are medications you take after a possible exposure to HIV to prevent you from getting HIV. PEP should be started within 72 hours (three days) after possible exposure to HIV. The sooner PEP is started, the better. **Every hour counts!** If a health care provider prescribes PEP, it should be taken for four weeks.

## PEP Following a Sexual Assault

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When a survivor goes to the emergency department for a medical forensic exam, they will be offered prophylaxis for gonorrhea, chlamydia, syphilis, and HIV. The forensic nurse and physician will evaluate whether there is enough known risk to give HIV PEP. PEP medications offered at a forensic exam are free – but only the first 3 to 5 days are provided and prescription will be given for the rest of the treatment.

If a survivor wants treatment for possible exposure to gonorrhea, chlamydia, syphilis, and HIV, but doesn't want a forensic exam with collection of evidence at an emergency department, they can go to their primary care physician, Maine Family Planning (MFP), or Planned Parenthood (PPNNE). MFP and PPNNE have clinics throughout the state and they offer sliding scale options for appointments. **Note: *that while MFP/PPNNE can offer an affordable appointment and provide a written prescription, they do not carry PEP medications and cannot offer it for free.***

# PEP Considerations

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## **Likelihood of contracting HIV**

The Centers for Disease Control and Prevention (CDC) estimates the likelihood of contracting HIV from a known positive person through consensual vaginal intercourse at 0.1%–0.2%, and through consensual receptive anal intercourse at 0.5%–3%. *The threat of HIV transmission is greater in non-consensual penetration, or sexual assault.*

The clinician's decision to recommend PEP should not be influenced by the HIV prevalence in the geographic location of the assault.

## **Whether or not significant exposure has occurred**

This includes direct contact of the vagina, penis, anus, or mouth with the semen, vaginal fluids, or blood of the assailant, including cases with or without physical injury, tissue damage, or presence of blood.

## **Knowledge of the HIV status of the assailant**

Unless the identity and HIV status of the assailant have been clearly established to assist with the decision-making, PEP should be promptly initiated and should not be delayed while awaiting test results from the assailant.

## **Potential Side Effects of PEP**

PEP may cause side effects like nausea or upset stomach. These side effects can be managed and aren't life-threatening. Severe adverse effects are very rare.

## **Survivors desire and willingness to complete the PEP regimen**

All medication considerations should be discussed with the survivor to ensure informed decision-making and consider their desire to take PEP medications.

# Accessing PEP

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If a survivor receives a medical forensic examination in the emergency room after an assault, a 3–5 day starter pack will be included at no additional charge to the survivor. A prescription will be given for the rest of the treatment.

One barrier to accessing PEP is paying for the prescription and the other is that not all pharmacies carry PEP medications. If someone wants to use a local pharmacy to fill the prescription, *we recommend calling local pharmacies to find out if they have PEP medications stocked and if they would be willing to work with someone in need of PEP quickly.*

# Paying for PEP

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## **Medicaid & MaineCare**

PEP medications are covered.

## **Private Insurance**

PEP medication coverage is based on your insurance plan. Co-payment assistance may be available from PEP manufacturer patient assistance programs or Victims' Compensation.

## **Insured, but does not use insurance**

Someone may decline to provide insurance information if they believe provision of that information would interfere with their personal privacy or safety. Unfortunately, PEP manufacturer patient assistance programs will not cover medications for someone who has insurance. Victims Compensation may be the only resource.

## **No Insurance**

- **Apothecary By Design (ABD)** is a specialty pharmacy that offers individualized support for patients. ABD's team will clarify coverage, and locate and apply for patient assistance programs on behalf of the survivor for free. They can dispense medications statewide and provide comprehensive pharmacist counseling via phone. Medication can ship free for next day arrival, or same day pickup in Portland. ABD collaborates with PEP providers throughout southern and central Maine, call 207-899-0939 with questions. ABD has an on call pharmacist available 24 hours that can be consulted by dialing in and choosing the option.
- **India Street Clinic** - based in Portland, this health center specializes in preventing and treating STDs and helping uninsured patients access care. Advocates statewide are welcome to call to explore options: 20-756-8067.

## **Victims' Compensation**

The Maine Victims' Compensation Program covers the costs of all medical forensic exams done in emergency rooms following a sexual assault. That includes the 3-5 day starter pack.

A survivor can then seek reimbursement from Victims' Compensation for the rest of the treatment if they have reported the crime to police and are cooperating with the investigation. However, as with all Victims' Compensation claims the remaining medication must be paid for up front by the survivor (or billed to the patient's insurance) and then the survivor can request reimbursement.

The above information is from the following sources:

- AIDS Education & Training Center Program, Non-Occupational Post-Exposure Prophylaxis (nPEP) Toolkit (Jan 2018)
- Centers for Disease Control and Prevention. Updated Guidelines for Antiretroviral Post Exposure Prophylaxis After Sexual, Injection Drug Use, or Other Nonoccupational Exposure to HIV- United States. (2016).
- New York State Department of Health AIDS Institute. Clinical Guidelines Program: PEP for Victims of Sexual Assault. (2014).