

# Indian Health Service

## HIV Basics

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ANDREW YU, MS, RN, ACRN

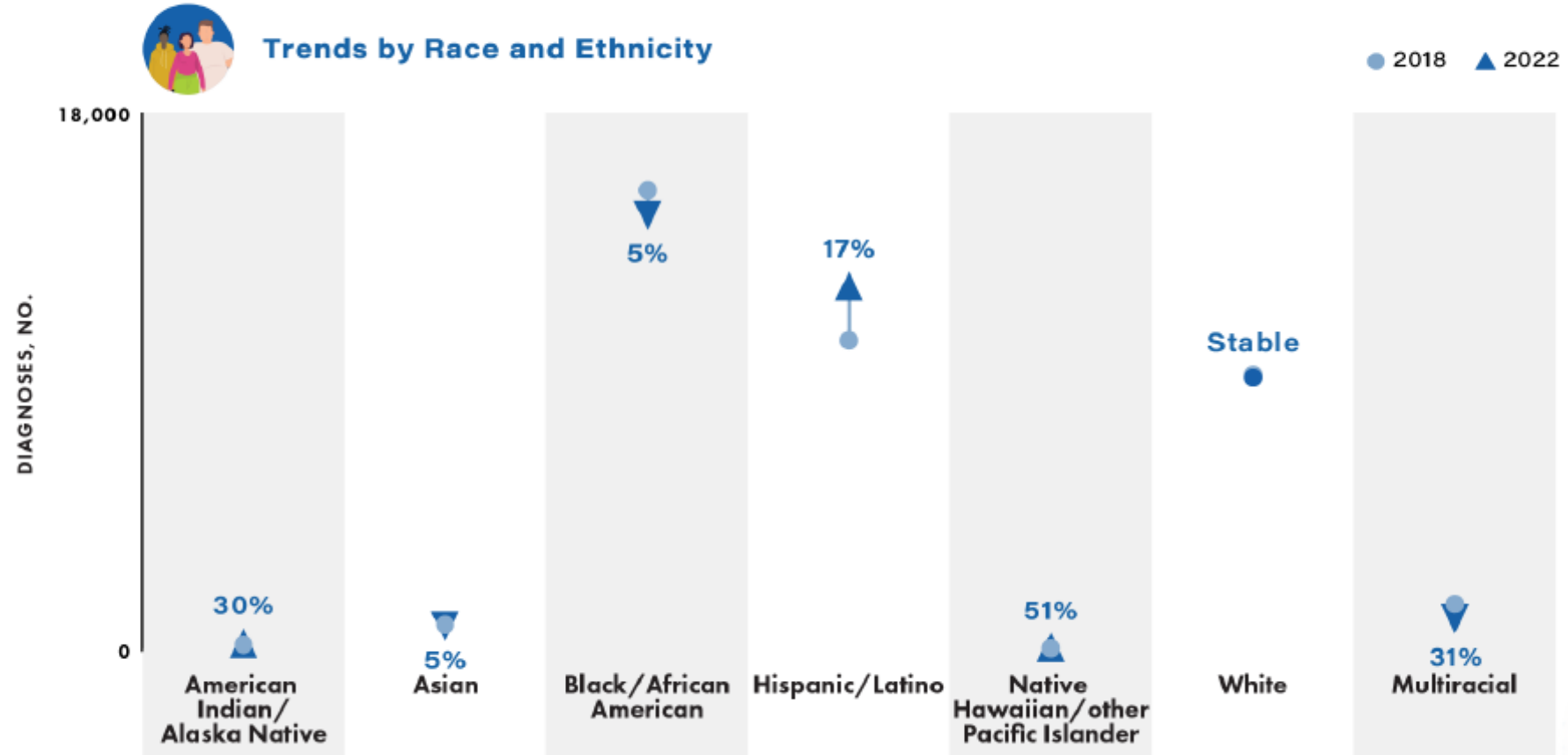
NATIONAL HIV/HCV/STI PROGRAM, IHS HQ

JANUARY 13, 2025



# New HIV Diagnoses in the US and Dependent Areas by Race/Ethnicity, 2018 - 2022

Figure 5. Diagnoses of HIV among persons aged  $\geq 13$  years, by race/ethnicity, 2018–2022—United States and 6 territories and freely associated states



Note. Hispanic/Latino persons can be of any race.

# Definitions

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- ❖ **Human Immunodeficiency Virus (HIV)**
  - Viral Suppression: Viral Load  $<200$  copies/mL
  - Undetectable: Viral load so low that test did not detect
- ❖ **Acquired Immunodeficiency Syndrome (AIDS)**
  - CD4  $<200$  cells/mm<sup>3</sup>
- ❖ **Pre-Exposure Prophylaxis (PrEP)**
  - Daily (or bimonthly injections) dosing **prior** to HIV exposure
- ❖ **Post-Exposure Prophylaxis (PEP)**
  - Emergency meds **immediately following** ( $< 72$  hours) HIV exposure



$$U = U$$

- Undetectable = Untransmittable (U=U)
- For sexual exposure, unable to transmit HIV to others if viral load is consistently <200 copies/mL
- Treatment as Prevention
- Ability to not have to use condoms
- Ability to breast or chest feed/family planning



# Testing Options

- Lab Testing
- Point of Care Testing
- Home Testing
- Native Test
- I Want the Kit (IWTK)



**Snag a Kit for the Greater Good.**

Love yourself. Love your community.

 ORDER A **FREE**,  
CONFIDENTIAL  
STI TEST KIT  
[iwantthekit.org](http://iwantthekit.org)

**iwtk**  
INDIGI I WANT THE KIT

This project is funded through the Indian Health Service and the Meredy WIGANS Fund.

# Window Periods

**Nucleic Acid Test (NAT)**  
window period

**10-33 days**



**Antigen/Antibody Lab Test**  
window period

**18-45 days**

**Rapid Antigen/Antibody Test**  
window period

**18-90 days**



**Antibody Test**  
window period

**23-90 days**



# PrEP Awareness and Use

among American Indian and Alaska Native Persons, 2019-2021

## Among American Indian and Alaska Native persons:

**33%** had ever heard of PrEP

**7%** were currently taking PrEP or had used PrEP in the last 12 months

## Among priority population groups:

**37%** of American Indian and Alaska Native persons had ever heard of PrEP

**3%** were currently taking PrEP or had used PrEP in the last 12 months

# Why PrEP?

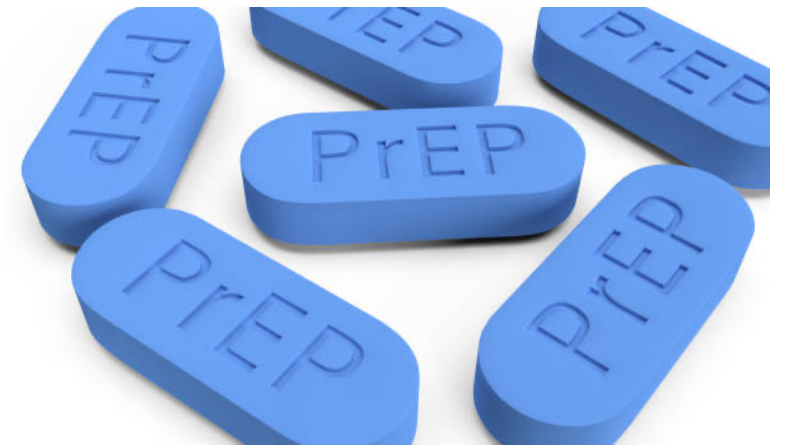
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**PrEP** is highly effective for reducing HIV risk

When taking oral PrEP daily or consistently (*at least 4 times per week*) the risk of acquiring HIV is reduced by:

~ 99% with sexual exposure

~ 74 – 84% among people who inject drugs (PWID)





# How long does PrEP take to work?

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- **Receptive anal sex (bottoming)**, PrEP pills reach maximum protection at about **7 days** of daily use
- **Receptive vaginal sex**, PrEP pills reach maximum protection at about **21 days** of daily use
- **Injection drug use**, PrEP pills reach maximum protection at about **21 days** of daily use
- No data available for PrEP pill effectiveness for **insertive anal sex (topping)** or **insertive vaginal sex**.
- We don't know exactly how long it takes for PrEP injections to reach maximum protection during sex.



# PrEP Options

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## Emtricitabine 200mg + Tenofovir DF 300mg (FTC/TDF or Truvada)

- On national core formulary
- Priced at ~\$1/pill
- Indicated for adults and adolescents  $\geq 35$  kg
- Not recommended for CrCl  $< 60$  mL/minute
- Take daily by mouth
  - On-demand or 2-1-1 dosing studied in MSM (anal sex)



# PrEP Options

## Emtricitabine 200mg + Tenofovir AF 25mg (FTC/TAF or Descovy)

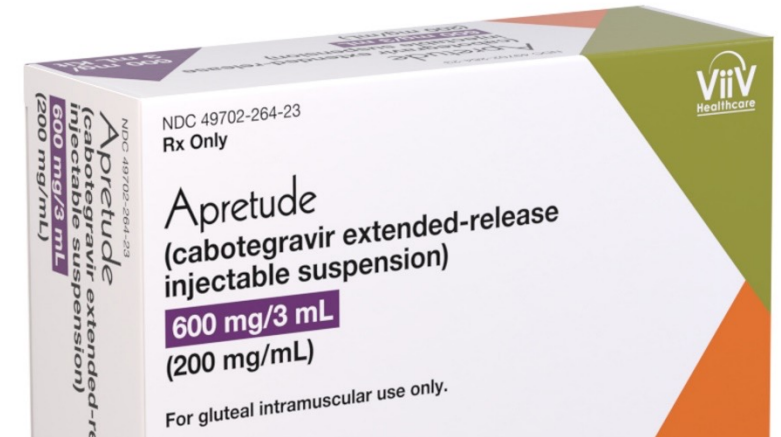
- Not on national core formulary
  - No generics available; patent protected until 2032
- Indicated for MSM/TGW adults and adolescents  $\geq 35$  kg
- May be used for patients when FTC/TDF is deemed inappropriate, defined as:
  - In the presence of bone disease
  - CKD stage 3 or greater (CrCl 30mg/g).
  - TAF/FTC should not be used in severe renal impairment (CrCl  $< 30$  mL/min)
- Take daily by mouth



# PrEP Options

## Cabotegravir (Apretude) 600mg long-acting IM injection

- Not on IHS National Core Formulary
- ~\$25,000/year out of pocket
- Covered by some insurers, patient assistance programs available
- Indicated for adults and adolescents  $\geq 35$  kg
- IM Injections every 2 months (after initial 2 monthly injections)



# Exposure to HIV is an Emergency!

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Post-Exposure Prophylaxis (PEP)

The ideal time to administer PEP – within 2 hours of exposure!

- **Give the first dose immediately upon presentation**

Can be given up to 72 hours after exposure

After 72 hours, it should not be given

Sooner =  
Better



# Who should be offered PEP?

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Individuals who are HIV negative or unknown HIV status who:

- Were sexually assaulted
- May have been exposed to HIV during consensual sex
- Shared needles or other equipment (works) to inject drugs
- May have been exposed to HIV at work
- **Requests HIV PEP**



# Resources

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- **HIV/PrEP Warm Line: (800) 933-3413**
  - [HIV/AIDS Management | National Clinician Consultation Center \(ucsf.edu\)](https://www.ucsf.edu/clinician-consultation-center)
  - Clinicians are available Monday through Friday, 9:00 a.m. to 8:00 p.m. EST. Voice mail is available 24 hours a day
  
- **Indian Country ECHO**
  - <http://www.indiancountryecho.org>
  - HIV ECHO, 2<sup>nd</sup> Wednesday of every month  
2-3 pm ET
  
- **IHS HIV Program**
  - [Provider Driven HIV PrEP Policy.pdf \(ihs.gov\)](https://www.ihs.gov/provider-driven-hiv-prep-policy)
  - [Nurse Driven HIV PrEP Policy](#)
  - [Pharmacist Driven HIV PrEP Policy](#)
  - [HIV PrEP Appendix](#)



# Contact Information

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**Andrew Yu, MS, RN, ACRN**

National HIV/HCV/STI Clinical Coordinator

Indian Health Service Headquarters

Division of Clinical & Community Services

[Andrew.Yu@ihs.gov](mailto:Andrew.Yu@ihs.gov)

(240) 472-6189

