Background

- Approximately 48% of new diagnoses of HIV occurred in MSM across Canada in 2011.
- In BC in 2012, 53% of new diagnoses were in MSM younger than 40.
- HIV pre-exposure prophylaxis is an evidence based strategy to decrease HIV infection in high risk individuals through daily or intermittent use of TDF/FTC (Truvada).
- Due to rapid changes in PrEP availability, it is important to understand the level of knowledge of PrEP amongst primary care providers to guide future education activities and complement program development.
- There are 43166 practicing family physicians in Canada, yet only 366 infectious disease specialists. Family physicians can escalate the prescribing capacity for PrEP.
- Prior surveys conducted of physicians on this subject have indicated a low level of knowledge amongst health care providers. We evaluated whether there has been an increase in knowledge since Health Canada approved PrEP, physician’s willingness to prescribe PrEP, and CME preferences.

Methods

- An online survey was conducted to evaluate the proportion of physicians with PrEP knowledge, PrEP’s acceptability, physician’s willingness to prescribe, and preferred routes of further CME.
- Descriptive information such as age, duration of practice, and location of practice (urban vs. rural) was used to describe the study population. We then looked at physician characteristics that make them more likely to prescribe PrEP.
- A Likert scale was used to determine the physician’s PrEP knowledge and comfort and CME preferences of those surveyed.

Results

- 67 Primary care providers completed the survey (<5% of attendees).
- Overall, 61% of respondents were female, and 58.2% had been in practice for <10 years. 88% did not consider themselves to have specialized knowledge in HIV. 80.5% had 5 or less HIV positive patients in their practice.
- 55% were from BC, 17% from Alberta, 10% from Ontario, and 16% from the remaining provinces. The majority (58.2%) practice in an urban setting.
- 64% reported prior knowledge of PrEP.
- Amongst respondents (n= 43), 30.3% rates their PrEP knowledge as poor/very poor, and 39.5% rated it as fair. 48.8% had never discussed PrEP with a patient.
- Overall only 15% reported ever prescribing PrEP.
- Only 27% of providers rated themselves as completely comfortable with assessing sexual risk activities for PrEP, 17% in discussing PrEP efficacy, and 13% in discussing side effects of PrEP. 52.2% agree/completely agree that their current knowledge limits their PrEP prescribing.
- 77.6% either agreed/completely agree that PrEP should be covered by provincial pharmcare.
- 78% indicated that additional education would increase PrEP prescribing. Preferred method of education were online modules (38%), local/national conferences (28%), and webinars (19%).

Conclusions

- Primary care providers were aware of PrEP, however few individuals had prescribed PrEP.
- A minority of providers were completely comfortable with risk assessment, counselling and monitoring for PrEP.
- Further CME interventions are required to support primary care providers for future PrEP scale up. Participating physicians demonstrated willingness to prescribe PrEP with appropriate education/support.