

More detailed information on Pre-exposure Prophylaxis (PrEP)

ILGA-Europe is alarmed by the fact that the prevalence of HIV transmission among men who have sex with men (MSM) and trans people (trans women in particular) in Europe is not decreasing and is even rising in some cases.

HIV prevalence globally is estimated to be 19 times higher among gay men and other MSM, than among the rest of the population. Similarly trans women would be up to 49 times more likely to acquire HIV. According to the European MSM Internet Survey, considered the most reliable source of information, across Europe 8% of gay men and other MSM report themselves to be living HIV, but with big geographic and age variations. In countries like France and the UK, one in four is reported to be living with HIV, when they reach the age of 45. In the central and eastern part of the EU, the prevalence of HIV is low, but has increased fourfold since 2006.

Targeted prevention strategies need to be put in place urgently, in cooperation with community-based civil society organisations. Prevention messages can only be effective if they do not stigmatise the groups at risk. Such messages must be part of wider health policies aiming at empowering those groups.

To meet the needs of target groups, preventive measures must be multifaceted and should communicate the following messages:

- Condoms are the easiest and most effective way to protect oneself and one's partner.
- Health systems should also ensure that all HIV-positive people are getting tested and have access to treatment. This would also allow to lowering the risk of HIV transmission.
- Post-exposure prophylaxis should be made available in all European countries.
- Pre-exposure prophylaxis (PrEP) is an effective prevention tool as evidenced by different studies.

In 2010 in the US: The iPrEx (Pre-exposure Prophylaxis Initiative) trial found that the HIV infection rate in HIV-negative gay men who were given a daily pill containing two HIV drugs was reduced by 44%, compared with men given a placebo. In 2014: PROUD in the UK and IPERGAY in France confirmed that PrEP is effective in preventing HIV transmission if used under certain circumstances.

Everyone should have the right to make an informed choice regarding whether or not they want to use PrEP as an additional prevention method, depending on their situation and behaviour.

However, we would also like to insist that PrEP is not a magic bullet. It is a very costly treatment, and it has secondary effects. All studies done so far involved strict counselling, testing and medical follow-up. Today, across Europe, LGBTI people (and in particular trans people, LGBTI people at risk of multiple discrimination, those who are sex workers, etc.) simply do not have access to non-discriminating and patient-centred health care. This means that they could not use PrEP in the same conditions as participants in the studies mentioned above. In addition, obviously, PrEP does not protect against other STIs.

PrEP should be made available as part of an overall prevention package. However, to be effective and to ensure that it does not harm, it should be taken in a framework of medical follow-up and access to non-discriminatory and patient-centred healthcare.