#### A Closer Look at the HIV PRN

#### Overview of the PRN

The ACCP HIV PRN includes pharmacists and students who practice or have interest within the specialty care area of HIV infections. In 2014, the HIV PRN was established. Dr. Melissa Badowski served as the first chair and worked with her colleagues to establish the PRN's long-term vision, which includes (1) providing a network for communication for its members; (2) delivering educational programming and networking events at national meetings; (3) providing members with access to other clinical specialists to help optimize HIV care; and (4) promoting opportunities for collaboration in educational and research activities.

The HIV PRN offers members the opportunity to collaborate and discuss the treatment of patients with HIV through transitions of care in both the inpatient and ambulatory care settings. This PRN provides a forum for clinical pharmacists to share evidence-based recommendations and experiences to optimize care delivered to patients with HIV infection. The HIV PRN aims to enhance its members' expertise through high-level education and collaborative research.

## Opportunities and Resources for Resident and Fellow PRN Members

The HIV PRN encourages the participation of students, residents, and fellows through service on one of its current committees, including the Research, Education/Programming, Nominations/Awards, Newsletter/Social Media, Advocacy, and Fundraising committees. In addition, the HIV PRN will start a new committee in 2019 (Student Liaison Committee) to enhance the integration of students and trainees into the HIV PRN and its committees.

The PRN will also initiate a mentorship program and travel awards this year to sponsor members for the 2019 ACCP Annual Meeting in New York, October 26–29.

The PRN encourages networking with experienced practitioners, researchers, and other HIV specialists at the HIV PRN Business Meeting and Networking Forum at the ACCP Annual Meeting.

## Current Clinical Issue: Undetectable = Untransmittable (U=U)

In 2016, the Prevention Access Campaign launched the slogan "Undetectable = Untransmittable," also known as U=U.<sup>1</sup> The U=U consensus statement endorses that people living with HIV who are receiving antiretroviral therapy (ART) and have an <u>undetectable</u> HIV viral load for <u>at least 6</u> <u>months</u> cannot infect others through sexual contact. The CDC defines undetectable as an HIV viral load less than 200 copies/mL.<sup>2</sup> Over 760 organizations from almost 100 countries now support the science of U=U, including the CDC, HIV Medicine Association, British HIV Association, International AIDS Society, and Joint United Nations Programme on HIV and AIDS (UNAIDS).<sup>3</sup> Three large published studies have shown that even after thousands of sexual encounters among serodiscordant partners, HIV was not sexually transmitted from individuals with virologically suppressed HIV-positive infection to their HIVnegative partners.

In the HPTN 052 study, 1763 serodiscordant couples in nine countries were enrolled, including both heterosexual and same-sex male couples.<sup>4</sup> The HIV-positive partners were randomized to receive either early or delayed ART. Of the 78 new HIV infections among partners, 72 were phylogenetically linked to a source partner. Of these infections, 46 were linked to the HIV-positive partner, while only 8 occurred after the partner had begun ART. Of these eight new HIV infections, four occurred before virologic suppression and four after ART failure and viral suppression was not achieved. No new HIV infections resulted from transmission of the virus from an HIV-positive partner who was virologically suppressed while receiving ART.<sup>4</sup> The PARTNER study observed 1116 serodiscordant couples (both heterosexual and same-sex male couples) from 14 European countries with more than 58,000 episodes of condomless anal and vaginal sex reported.<sup>5</sup> From these couples, only 11 HIV-negative partners acquired HIV infection at the end of the study, none of which were linked to their respective HIV-positive partners.

The Opposites Attract study followed 358 same-sex male serodiscordant couples from Australia, Thailand, and Brazil with around 17,000 sexual episodes.<sup>6</sup> Only three HIV-negative partners acquired HIV infection, none of which were linked transmissions.

The U=U campaign aims to improve the lives of people living with HIV by reducing the shame and fear of sexual transmission, dismantling the stigma of HIV, increasing the possibility of conceiving children, and encouraging people living with HIV to start and stay on treatment.<sup>1</sup>

These studies highlight the importance of beginning ART early in addition to achieving and maintaining virologic suppression as a means to prevent sexual transmission of HIV.

# References:

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4. Cohen M, Chen Y, McCauley M, et al.; for the HPTN 052 Study Team. Antiretroviral therapy for the prevention of HIV-1 transmission. N Engl J Med 2016;375:830-9. Available at https://www.nejm.org/doi/full/10.1056/NEJMoa1600693.

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Submitted by: Sarah E. Pérez, Pharm.D., BCACP, AAHIVP