

Poster presentation

## Ten years of non-occupational HIV post-exposure prophylaxis: what have we learned?

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### Background

Non-occupational HIV post-exposure prophylaxis (nPEP) has been prescribed in Switzerland for more than a decade. Large population-based analysis of nPEP over such a period has rarely been studied.

### Methods

We conducted a retrospective analysis of all nPEP requests between 1998 and 2007 in a single nPEP reference center. Global results as well as trend over time were analysed.

### Summary of results

Number of nPEP requests increased from 20 to 191 (>850%) over the study period. Among 1,205 events, 51% were heterosexual exposure, 13% homosexual exposure, 6% sexual assaults, and 23% needlestick and other percutaneous injuries. Sixty-six percent of exposed patients were males, 6% injection drug users, 3% commercial sex workers, 14% clients of commercial sex workers, and 5% cleaning personnel. HIV status of source persons was positive in 23%. For the remaining 920, active tracing allowed to test 313 persons and identified 11 undiagnosed HIV individuals (3.5%). nPEP was recommended for 990 events but could be avoided or interrupted in 290 cases when the source was tested negative. Out of 784 patients who started nPEP, 57% reported side-effects, which led to treatment interruption in 52 cases. There were two HIV seroconversions, none of which was attributed to nPEP failure.

### Conclusion

nPEP requests increased over time. Testing the source person for HIV allowed to avoid nPEP in 29% of cases, and is therefore paramount in the management of potential HIV exposure. Furthermore, it allows active screening of high-risk behaviour population for undiagnosed HIV infection, as shown by our prevalence of 3.5%. This number may justify nPEP prescription in cases where HIV status of the source cannot be determined.