HIQA to commence HTA on pre-exposure prophylaxis (PrEP) programme to prevent HIV in Ireland

HIQA is to examine the use of pre-exposure prophylaxis to prevent HIV infection in Ireland. HIV infection remains a significant public health concern. In 2017, over 500 new HIV infections were reported to the Health Protection Surveillance Centre (HPSC) in Ireland. In fact, the years 2016 and 2017 witnessed the highest number of new HIV notifications ever reported to the HPSC. Approximately half of all new notifications were in males who have sex with males (MSM). Since 2006, there has been a threefold increase in new infections in the MSM community.

Pre-exposure prophylaxis (PrEP) is a form of HIV prevention whereby HIV medications (most commonly two antiretrovirals used in combination: tenofovir and emtricitabine) are taken by HIV-negative individuals to prevent infection. In their latest guidelines, the World Health Organization (WHO) recommends that PrEP containing tenofovir should be offered as part of HIV prevention programmes to people at 'substantial risk of HIV infection'. In the US, the FDA approved Truvada (combination of tenofovir and emtricitabine) for PrEP to reduce the risk of sexually-acquired HIV-1 infection in 2012, while the European Commission granted marketing authorisation for Truvada throughout the EU in August 2016 for the same indication.

Truvada, a combination medication consisting of tenofovir and emtricitabine, was the first preparation made available in Ireland. Since then, two generic formulations have entered the Irish market. If prescribed in Ireland, these medications must be paid for out-of-pocket by individuals. Importantly, patients who take PrEP must be monitored closely. This includes regular testing for HIV and other STIs and monitoring for side-effects of PrEP.

Eleven countries currently fund PrEP through national programmes. In 2015, France became the first European country to reimburse PrEP through its public health system. A number of other EU countries have subsequently announced that they would fund a PrEP programme, including Belgium, Norway and Scotland, and many others are in the process of implementing national PrEP programmes.

The health technology assessment being carried out by HIQA will look at the clinicaland cost-effectiveness of funding a PrEP programme in Ireland. In addition to providing PrEP free of charge, such a programme would also monitor patients with regular testing and provide counselling and advice. The assessment will also look at the budget impact of introducing a PrEP programme, and it will assess the organisational and resource implications of such a service.