

PrEP 2-1-1 or **"On-Demand" PrEP** is a *non-daily* PrEP dosing strategy that has been evaluated in men who have sex with men (MSM) and was 86% effective at preventing HIV transmission in a clinical study in Canada and France. The PrEP 2-1-1 protocol shown below is not FDA-approved; however, PrEP 2-1-1 has been endorsed by the International AIDS Society USA.

What is the Difference Between PrEP and PrEP 2-1-1?

Daily **PrEP** is the FDA-approved use of a daily pill (Truvada® or Descovy®) that combines two drugs to prevent HIV transmission. Many studies have shown that it can reduce the risk of HIV transmission by up to 99%. Studies have been done proving PrEP is effective for men, women, and transgender people, as well as preventing transmission through injection drug use. The United States Prevention Task Force has given PrEP Grade A status.

The **PrEP 2-1-1** dosing strategy has not been FDA approved but has been studied with Truvada® and shown to be an effective HIV prevention choice for MSM. PrEP 2-1-1 can prevent HIV transmission during anal sex. PrEP medication absorbs slower into vaginal tissue than anal tissue, so PrEP 2-1-1 is not an effective option for vaginal sex. PrEP 2-1-1 can be an option for people who have less frequent anal sex or for people who are unable or prefer not to take daily PrEP.

How Does PrEP 2-1-1 Work?

PrEP 2-1-1 starts by taking **TWO** pills between 2 and 24 hours before sex. Taking the pills closer to 24 hours before sex is better but you can use PrEP 2-1-1 up to 2 hours before sex. After sex, you take **ONE** pill 24 hours after the first pills, and **ONE** pill again 24 hours after that. That's PrEP 2-1-1, get it?



Important Note: The PrEP 2-1-1 dosing schedule changes if you are going to have sex within seven days of your last PrEP dose. Start by taking just **ONE** pill between 2 and 24 hours before sex. You still take **ONE** pill 24 hours after the first pill, and **ONE** pill again 24 hours after that.

- Daily PrEP has extensive clinical trial data on safety and efficacy and is the only dosing strategy recommended by the CDC.
- The State Office of AIDS recommends PrEP and financial assistance may be available through California's Prep-Assistance
 Program (PrEP-AP) for uninsured and insured individuals who meet the eligibility criteria.
- PrEP 2-1-1 has only been studied in MSM. There is no data and it is not recommended for use in cis-women, cis-men who have sex with women, transgender women and men, people who inject drugs, or people with active hepatitis B coinfection.
- The PrEP 2-1-1 protocol with Truvada® is the only non-daily strategy with evidence for HIV prevention. PrEP 2-1-1 with Descovy® is not recommended outside of a clinical trial.
- PrEP 2-1-1 should be prescribed by a healthcare provider and should include HIV and STI testing at least every 3 months.
- People considering PrEP 2-1-1 should be able to plan or delay their sexual activity so that their first dose is at least 2 hours (and preferably closer to 24 hours) before sex.

Select Clinical Trials and References: IPERGAY (Molina et al. NEJM 2015): 400 MSM (France, Canada) randomized to PrEP 2-1-1-vs. placebo. 86% efficacy. Participants took median 15 pills per month. IPERGAY open label extension (Molina et al. Lancet HIV 2017): only one HIV infection detected in 361 MSM over 18 months follow-up. San Francisco Department of Public Health Dear Colleague Letter with recommendations for PrEP 2-1-1: http://www.gettingtozerosf.org/wp-content/uploads/2018/11/HIVUpdate_02122019_v2.pdf