

## PRESS RELEASE

### **Pre-exposure prophylaxis can prevent HIV transmission in Hong Kong**

Antiretroviral drugs are effective not just for treating patients who have HIV but can also prevent transmission in those who don't. A study in the newest issue of the *Hong Kong Medical Journal* reveals that such treatment, referred as pre-exposure prophylaxis (PrEP), is acceptable to men who have sex with men (MSM) in Hong Kong, and that they are willing to pay for the preventive treatment if the price isn't too high.

The FDA-approved antiretroviral drug for PrEP—a combination of tenofovir disoproxil fumarate and emtricitabine, also known as TDF/FTC—is currently unavailable in the public service in Hong Kong, explained Professor Shui-Shan Lee of the Stanley Ho Centre for Emerging Infectious Diseases at The Chinese University of Hong Kong. In a pilot study, Professor Lee and his research team provided TDF/FTC to 71 MSM at 13.3% of the original drug cost. The patients adhered well to the drug regimen and none contracted HIV despite engaging in high-risk sexual activity.

In Hong Kong, MSM are generally very receptive to the idea of PrEP. The authors found that their retention rate was 80%, and almost 90% indicated that they would like to continue with PrEP after the trial period of 28 weeks. Mild and transient adverse reactions like dyspepsia and nausea were quite common but in most cases the patients opted to continue treatment. Although PrEP can protect against HIV, Professor Lee advises caution: "Condom use decreased in 20% of the MSM on PrEP. Other sexually transmitted infections like gonorrhoea, chlamydia and syphilis should not be neglected. PrEP should not be prescribed without proper monitoring and counselling."

The main obstacle to promoting the use of PrEP is the lack of a regular service programme for delivering the drugs to those in need. Cost is the key impediment—patented TDF/FTC, at a monthly cost of over HK\$5000, is unaffordable to MSM in the community. A monthly fee of HK\$500 or less was considered reasonable by about a half of the MSM joining the study. Stigma is another concern which discouraged some MSM from taking PrEP.

The United States Centers for Disease Control and Prevention, the World Health Organization and other international and national authorities recommend PrEP for

people at higher risk of HIV infection. In the Asia Pacific region, affordable generic TDF/FTC is available in some countries. Globally, the overall coverage has remained low among high risk individuals. In the United States, one out of every six persons considered at risk of HIV infection is on PrEP.

With an HIV prevalence of 6.5%, MSM constitutes the main population group at high risk of HIV infection in Hong Kong. In 2018, over 70% of newly diagnosed HIV patients with recorded route of infection were MSM. PrEP is an effective form of prevention which should be made accessible to such high-risk populations. As shown in this first ever PrEP clinical study in Hong Kong, a partially self-financed mode of service delivery can be an affordable means of scaling up PrEP use.

The research article “Piloting a partially self-financed mode of HIV pre-exposure prophylaxis delivery for men who have sex with men in Hong Kong” was published in the latest issue of the *Hong Kong Medical Journal*.

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## 事前預防用藥有助防止愛滋病毒在香港傳播

抗逆轉錄病毒藥物不僅對治療愛滋病毒感染者有效，而且可以處方予非感染者，以防止愛滋病毒傳播。香港中文大學（中大）最新發表的一項研究顯示，這種被稱為「事前預防用藥」（英文簡稱 PrEP）的治療方法，得到男男性接觸者的接受。如果價格不高，他們願意支付費用以預防愛滋病毒感染。

中大研究小組負責人、中大醫學院何鴻燊防止傳染病研究中心李瑞山教授解釋，TDF / FTC 是美國食品藥品監督管理局（FDA）批准的事前預防用藥藥物，不過目前香港尚未有提供事前預防用藥的公共服務。研究團隊最近在《香港醫學雜誌》發表的一項試驗性研究，共招募 71 名男男性接觸者接受事前預防用藥。參加者需要每天服藥，但只需支付原來藥價的 13.3%。結果發現參加者普遍跟從指示服藥，雖然有進行高風險性行為，但沒有人感染愛滋病毒。

「香港的男男性接觸者普遍接受事前預防用藥。研究參加者八成持續服藥，當中近九成希望於試用期後繼續用藥。」服藥者可能會出現輕度和短暫的不良反應，常見的如消化不良和噁心，但在大多數情況下願意繼續接受治療。令人關注的是，研究顯示 20% 男男性接觸者在服用有關藥物後，減少使用安全套。他補充，男男性接觸者不應忽略性病的傳播，如淋病、衣原體和梅毒等，需要接受相應的輔導和篩查。他說：「在沒有適當監察和諮詢的情況下，不應處方事前預防用藥。」

「目前推行事前預防用藥的主要障礙是缺乏常規計劃，為有需要人士提供服務。由於專利的 TDF / FTC 每月費用超過 5,000 港元，對於一般社群來說是無法承受的。大約一半參加研究的男男性接觸者認為每個月藥費不超過 500 港元為合理水平。」部分男男性接觸者亦可能認為是一件恥辱的事而不選擇用藥。

美國疾病預防控制中心、世界衛生組織以及其他國際和國家主管部門建議對感染愛滋病毒風險較高的群組處方事前預防用藥。在亞太地區，一些國家有比較便宜的仿製 TDF / FTC，可供事前預防用藥。全球而言，高風險人士事前預防用藥的總體覆蓋率仍然很低。在美國，每六名愛滋病毒感染高風險人士當中只有一人使用事前預防用藥。

在香港，男男性接觸者的愛滋病毒感染率為 6.5%，是主要的高風險群組。在 2018 年，超過 70% 具感染途徑記錄的新確診感染者屬於男男性接觸者。對他們來說，事前預防用藥是一種有效的預防措施，應使這些高風險群組能夠使用。正如此臨床研究所顯示，部分自費的服務模式可以作為策略，增加事前預防用藥的覆蓋率，

使高風險群組接受經濟能力可負擔的預防措施。

詳細內容可參閱研究原文《以部份自費模式在香港設立為男男性接觸者提供愛滋病事前預防用藥試點》。