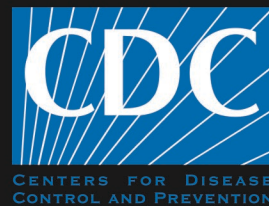


An Open Letter To The



What if you're wrong about PrEP?

The Centers For Disease Control and Prevention (CDC) recently recommended that half a million gay men in the United States receive Truvada for the prevention of HIV. Further, they changed their wording from “unprotected sex” to “condomless sex” to describe intercourse without a condom, thus saying that sex without a condom could still afford protection from disease. AHF regards these decisions as dangerous to the public health of the United States. Both of these decisions are based on the premise that PrEP (Pre-exposure prophylaxis) with Truvada is a sound public health strategy.

AHF believes that while Truvada may work to protect a small segment of the population of HIV-negative individuals, all of the scientific studies have shown that it will not work on a community-wide basis because of consistently bad adherence by study subjects—even under ideal circumstances.

However, if the data that will be reported in the next two years show that we are wrong about PrEP, we will be the first to admit it. We challenge to CDC to make the same pledge.

Currently, the gay male community is facing soaring rates of syphilis and other STDs.^{1,2} The CDC knows that Truvada gives no protection from syphilis. If those numbers continue to go higher, will the CDC go back to calling unsafe behavior “unprotected?” If people on Truvada sero-convert, will the CDC reconsider its rash decision on PrEP? If men who become infected develop drug resistance, will the CDC apologize?

Medical ethics are based on the concept of “do no harm.”³ Beyond the potential damage to the health of individuals, the CDC’s ill-advised strategy of mass treatment with Truvada poses a significant risk to the condom culture that has prevailed among gay men for three decades.

Studies show that the majority of young gay men use condoms always or sometimes.⁴ This is borne out by the fact that the current rates of new infections would be far higher if they didn’t. Therefore, spreading misinformation that Truvada affords protection where it doesn’t has the potential to do grave harm.

Both the community and the government must be accountable for the guidance they give to vulnerable populations. The debate about safer sex goes back to the beginning of the epidemic and every time we didn’t heed advice to protect ourselves, we paid a terrible price. AHF will do everything possible to make sure that doesn’t happen again, but if we are wrong we will take responsibility for our decisions. We hope everyone else will do the same.



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¹ Centers for Disease Control and Prevention (CDC). (May 9, 2014). Primary and Secondary Syphilis — United States, 2005–2013. Morbidity and Mortality Weekly Report (MMWR). Retrieved online: <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6318a4.htm>

² Centers for Disease Control and Prevention (CDC). (2014). 2012 Sexually Transmitted Diseases Surveillance. Retrieved online: <http://www.cdc.gov/std/stats12/Surv2012.pdf>

³ Gillon R (1994). Medical ethics: four principles plus attention to scope. *British Medical Journal*, 309(6948): 184.

⁴ Rosenberger JG et al. (2012). Condom use during most recent anal intercourse event among a US sample of men who have sex with men. *Journal of Sexual Medicine*, 9(4): 1037-1047.