

HIV PREVENTION LEARNING COMMUNITY



Bimonthly Newsletter

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February Newsletter

INJECTABLE PREP SUPPORT

Are you interested in implementing injectable PrEP at your site but not sure where to start? As your regional PTC we are **available to provide clinical training and technical assistance** support on many topics, including injectable PrEP.

What might this look like? We can discuss and review protocols, including sharing examples from sites with existing CAB-LA programs. We can link you with clinics who have implemented CAB-LA, who can share their experiences. We can help troubleshoot potential barriers and discuss ways to overcome them. Finally, we can offer training and clinical support for your team members. And more! We would love to support your clinic in implementing CAB-LA - please reach out to get started.

JANUARY LC RECAP

January's LC topic was **Injectable PrEP**. We heard from each clinic about how they have prepared for injectable PrEP, or CAB-LA, and what concerns they have.

Kerri Carnevale, DNP, discussed injectable PrEP at New York Presbyterian Hospital and **lessons learned from their implementation experience**. These include the importance of patient counseling, cost and financing, and lingering questions around when Cabotegravir is protective against HIV.

Injectable PrEP can be a great tool for patients, but comes with its own challenges. We would love to assist your clinic in working towards successful implementation. **Interested in discussing injectable PrEP further? Let us know!**



RESOURCES

- [January LC Slides](#)
- [Injectable PrEP Resource Document](#)
- [ViiV Resources](#)
- [STI Awareness Week:](#)
 - Coming soon! April 9-15th

What's next?

NEXT MONTH'S LC

Details:

- March 28th at 12-1pm EST
- Topic: Sexual Health Metrics: Data to Practice
- Considerations:
 - Discuss who from your site should attend this data-focused LC - 2-4 individuals
 - There will be a short activity to complete ahead of the LC



DRUG-RESISTANT GONORRHEA

On January 19, 2023, the Massachusetts Department of Public Health sent out a [clinical alert](#) about two concerning cases of gonorrhea. They noted that these cases represented the first strain of gonorrhea identified in the United States that demonstrated resistance or reduced susceptibility to all drugs that are recommended for gonorrhea treatment.

While both of these individuals were successfully treated with ceftriaxone, the emergence of this strain shows that gonorrhea continues to evolve in its ability to develop resistance to antibiotics.

CDC also sent out a [Dear Colleague letter](#), saying, "This case is a reminder that antimicrobial-resistant gonorrhea remains an urgent public health threat nationally and internationally". They also restated their guidelines: the recommended regimen for gonorrhea treatment is a single injection of ceftriaxone 500 mg intramuscularly. CDC also recommends routine test of cure for all known pharyngeal infections.

Have a clinical question? Check out the clinical consultation line: www.stdccn.org