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**The Chicago Study
for HIV Prevention
in Psychiatry******

A Mixed-Methods Investigation of Knowledge, Perceived Barriers to Implementation, and Training Needs to Support Pre-Exposure Prophylaxis (PrEP) Prescription by Psychiatrists

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Disclosures

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Introduction

- HIV incidence has fallen in the U.S. in the past decade¹
- Psychiatric patients experience disproportionate incidence and risk for HIV and face numerous barriers to care engagement and retention²
- Prevalence estimated to be 10x greater among psychiatric patients³
- Data on biomedical prevention scarce in current literature

1. CDC & SAMHSA.; 2019.

2. Bauer-Staeb C, Jørgensen L, Lewis G, Dalman C, Osborn DPJ, Hayes JF. *Lancet Psychiatry*. 2017;4(9):685-93.

3. Hughes E, Bassi S, Gilbody S, Bland M, Martin F. *Lancet Psychiatry*. 2016;3(1):40-8.



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Current Study

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- Practicing psychiatrists ($N = 880$)
 - » Survey:
 - » Preferences, barriers, previous experiences with PrEP
 - » Confidence/skills managing non-psychiatric conditions¹
 - » Knowledge assessment
 - » Interviews with subset (30)
 - » Exploration of practice/administrative barriers
 - » Training needs
 - » Opinions and attitudes regarding PrEP prescription
- Recruitment from the 50 counties in the U.S. that account for 50% of new HIV diagnoses (EHE priority jurisdictions)

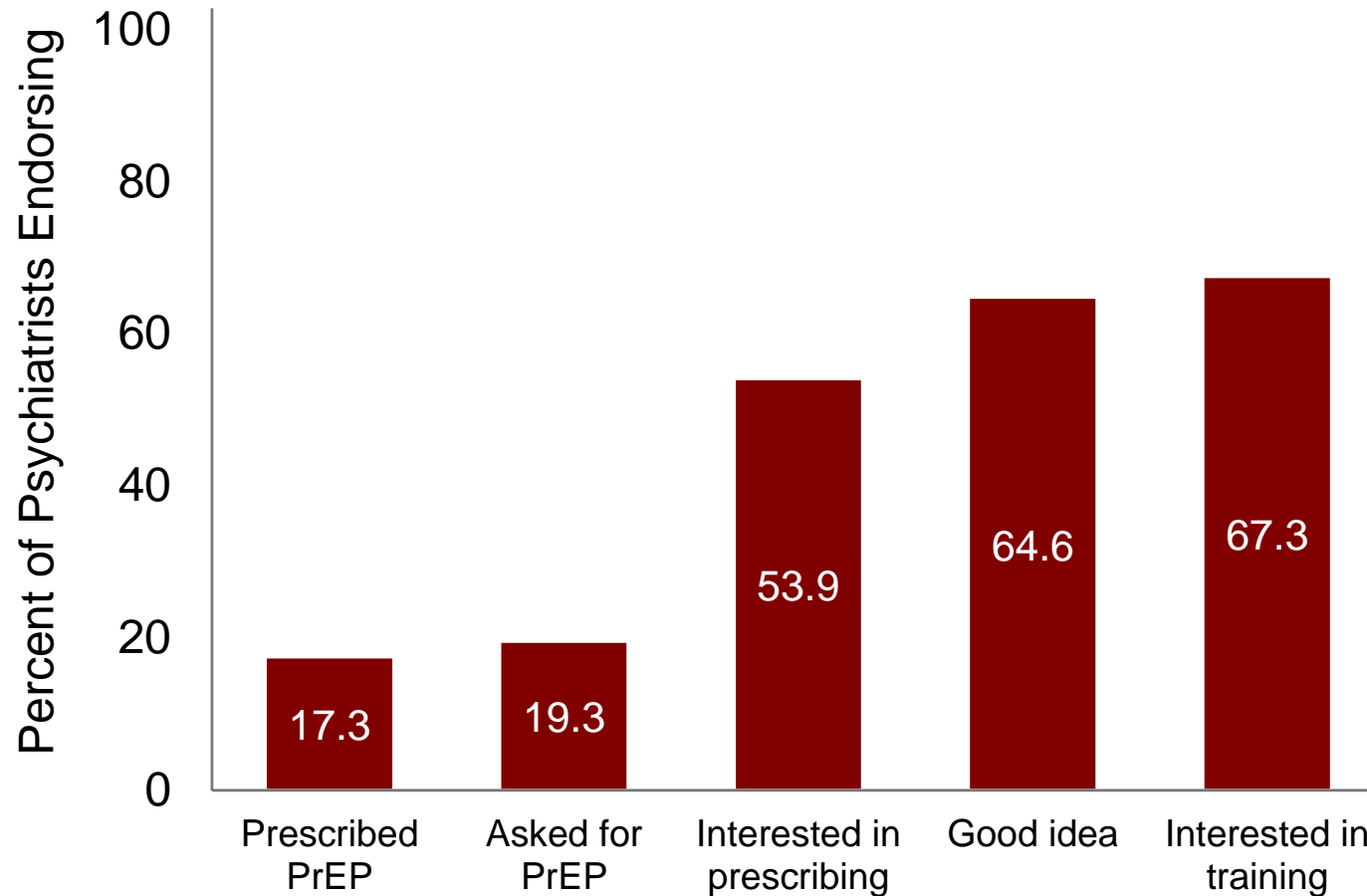
1. Whiteman KL, Naslund JA, DiNapoli EA, Bruce ML, Bartels SJ. Psychiatr Serv. 2016;67(11):1213-25.

Demographics

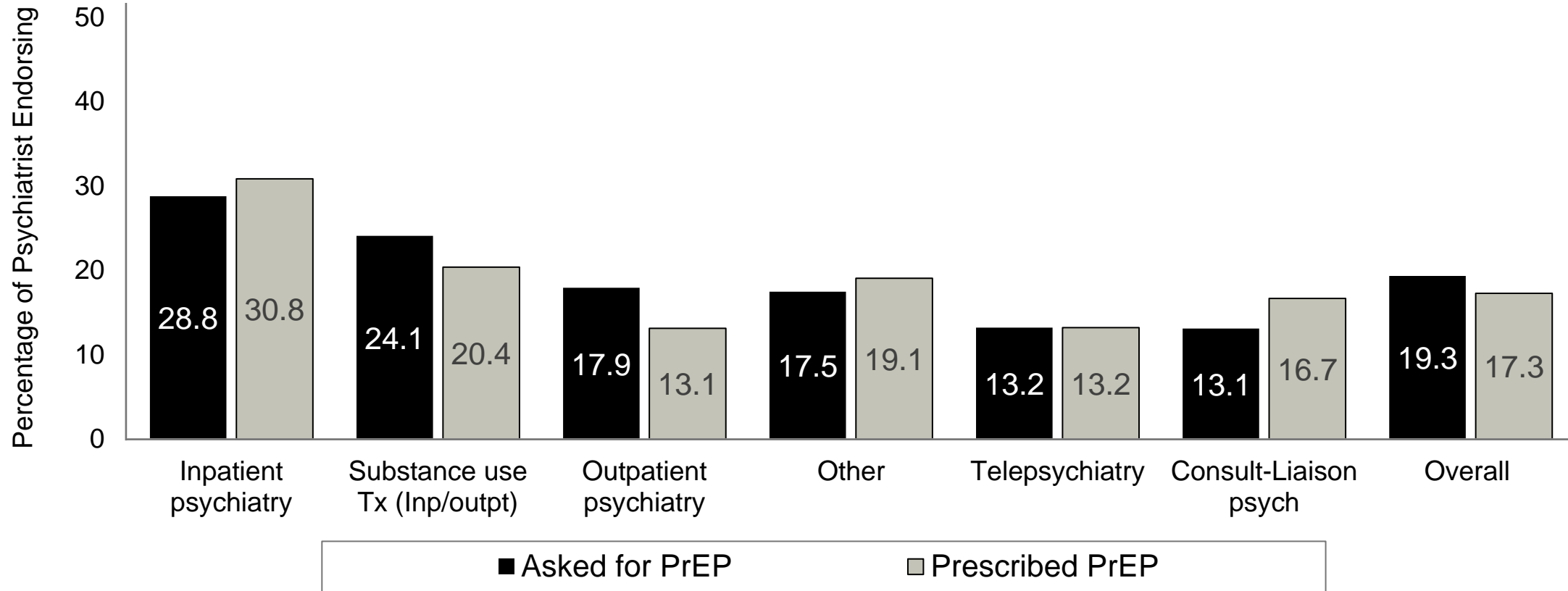
- Mean practice duration:
14.0 (95%CI: 13.3-14.7) years
- Mean percent time in patient care:
72.1% (70.4-73.8)
- Mean percent time in outpatient care:
70.1% (67.7-72.6)

Level of Practice	<i>n</i>	%
Fellow	116	13.2
Attending	764	86.8
Practice Location		
Academic medical center	642	73.0
Private solo practice	75	8.52
Private group practice	80	9.09
FQHC	24	2.73
CCMHC	25	2.84
Other	34	3.86
Primary Practice Setting		
Inpatient psychiatry	146	16.6
Consult-liaison psychiatry	84	9.55
Outpatient psychiatry	480	54.6
Addiction care (inpt/outpt)	54	6.14
Telepsychiatry	53	6.02
Other	63	7.16
Region		
Northeast	304	34.6
Midwest	137	15.6
South	232	26.4
West	207	23.5
EHE Priority Jurisdiction		
No	257	29.2
Yes	623	70.8

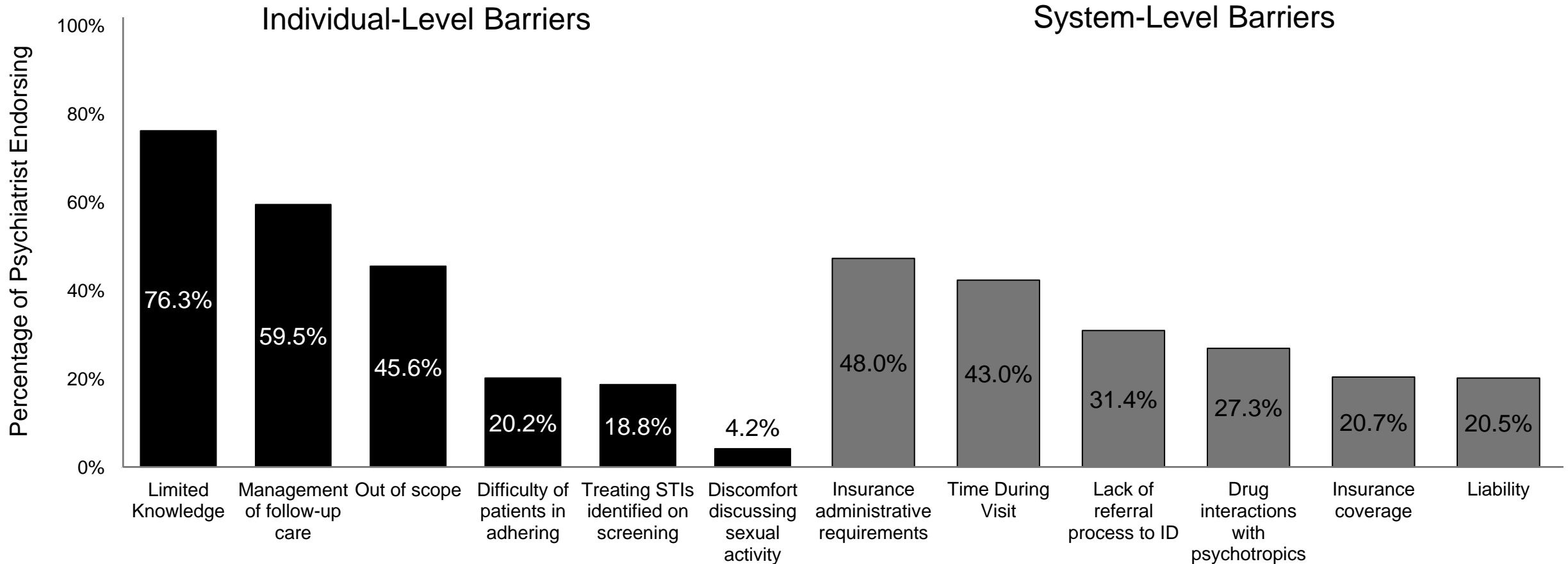
Previous Experiences with PrEP



Previous Experiences with PrEP



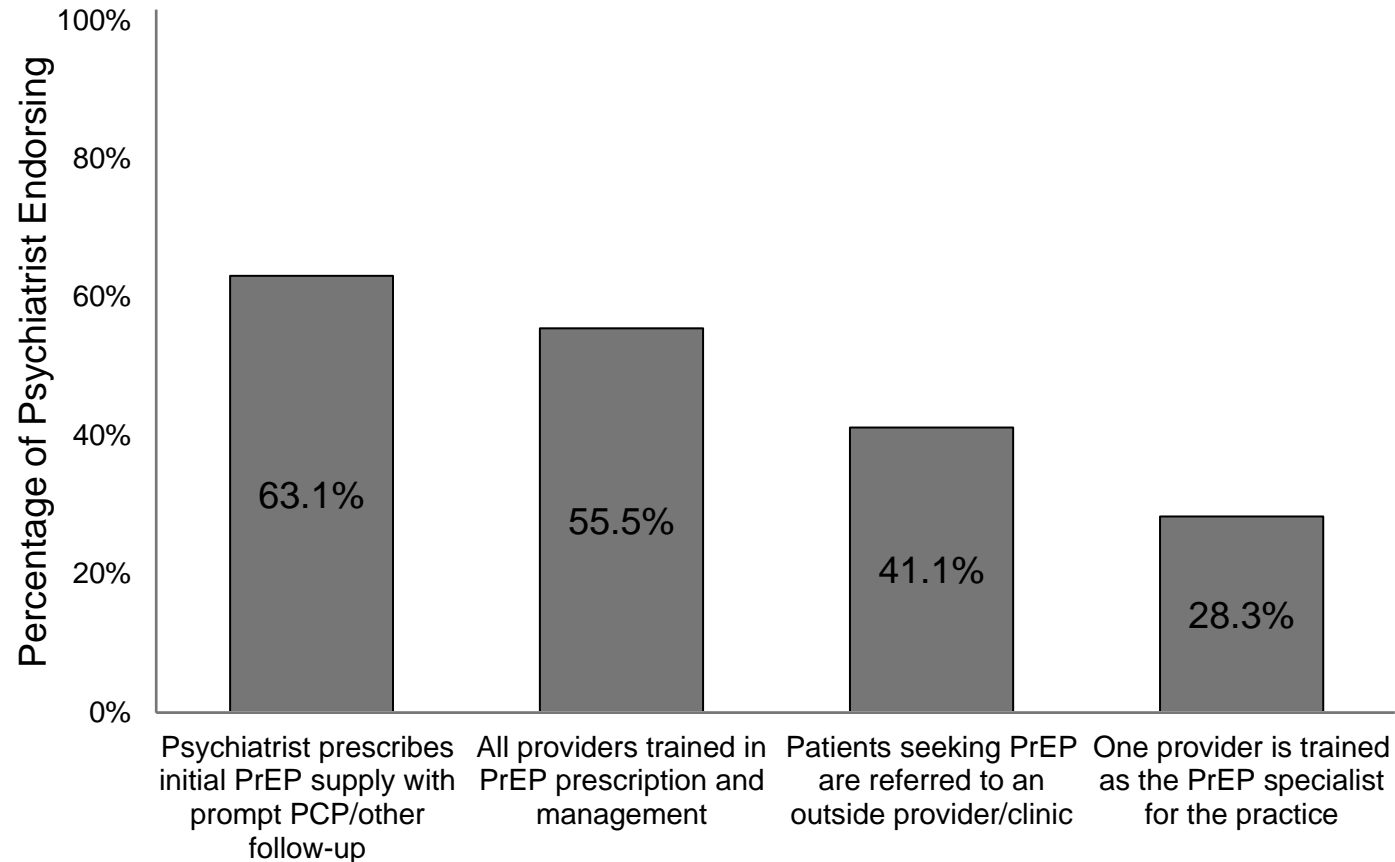
Barriers to PrEP Prescription by Psychiatrists



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Preferred Implementation Model



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Summary

- Psychiatrists are aware of biomedical HIV prevention strategies
- Few (<20%) have prescribed PrEP
- Evidence-based training is needed to surmount barriers
- **Harm reduction** as a guiding principle for implementation of PrEP prescription in psychiatry
- HIV prevention as a gateway for preventive care for psychiatric patients
- Linkage to care from both inpatient and outpatient psychiatry settings



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Questions?

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