



Pre-exposure Prophylaxis (PrEP) Provision in England: Recent Developments

Summary

In 2019, the provision of Pre-exposure Prophylaxis (PrEP), an anti-HIV medication, has continued to attract attention. PrEP is a drug taken by HIV-negative individuals at risk of acquiring HIV, which reduces viral replication and minimises the chance of a permanent infection developing.

Although PrEP is widely available in Scotland, access in England has initially been through an impact trial. The Terrence Higgins Trust has campaigned for PrEP to be made available through routine commissioning in all parts of the country. It states that while ending HIV transmission in the UK is “achievable”, this can only happen if “we use all of the tools available to us”, including PrEP. On 29 October 2019, the Secretary of State for Health and Social Care, Matt Hancock, said that the “roll-out from a trial to routine commissioning will happen in April (2020)”. However, various campaigners remain concerned that people will contract HIV while waiting to access the medication.

The key PrEP developments since 2016 have been:

- In December 2016, NHS England committed to a large-scale PrEP trial, which aimed to establish the demand for PrEP and how long people stay on the treatment in a real-world setting.
- In October 2017, the impact trial was launched with 10,000 places. This was increased to 13,000 in June 2018 to adjust for the initial high recruitment. In early 2019, NHS England’s Programme Oversight Board agreed to expand the trial to include 26,000 participants.
- In October 2019, NHS England provided an update that 15,700 people across 153 clinics had received PrEP through the trial. Almost all trial clinics are now open and recruiting with thousands of places on the trial remaining available across all eligible at-risk groups and geographies.

The Department of Health and Social Care has stated that it will work with local authorities in England to plan for a “seamless transition” from the trial to routine commissioning in 2020/21.

Joe Skelton | 5 November 2019

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HIV: Situation in the UK

Public Health England has recorded that 4,453 people were newly diagnosed with HIV in the UK in 2018. This figure represents a 29% decline from the 6,271 diagnoses reported in 2015 and a 6% decline relative to the 4,761 new diagnoses reported in 2017.¹ This continued decline has been driven by a reduction in new HIV diagnoses across the population. Diagnoses among men who have sex with men have decreased by 39% since the 2015 peak, to 1,908 diagnoses in 2018. Diagnoses have also declined by 24% among people who acquired HIV through heterosexual contact, from 2,304 in 2015 to 1,550 in 2018. On average, over £300,000 is spent treating someone with HIV over their lifetime.²

Pre-exposure Prophylaxis (PrEP) Provision

Pre-exposure Prophylaxis (PrEP) is an anti-HIV medication which acts to prevent HIV-negative people from becoming infected.³ It is an antiretroviral drug.⁴ These drugs work by stopping the virus replicating in the body. This allows the immune system to repair itself and prevent further damage.⁵ PrEP can be taken orally as a single tablet once a day and there are various dosing options which depend on risk factors.⁶ The approximate cost of the generic drug taken daily is £20 per person per month.⁷

It is difficult to establish the impact that PrEP availability has had on the decline in new diagnoses. This is because the roll out has coincided with additional testing and the shortening of time to treatment initiation.⁸ Nonetheless, PrEP is now considered one method of fighting HIV. According to the Joint United Nations Programme on HIV and AIDS (UNAIDS), it is “highly effective in preventing HIV-negative people from acquiring the virus”.⁹ The Terrence Higgins Trust, which campaigns on HIV and sexual health issues in the UK, has called for PrEP to be drawn upon as one of several tools which will help eradicate HIV.¹⁰ The Government announced in January 2019 that it aims to end HIV transmissions by 2030.¹¹

There is divergence across the UK in terms of the availability of PrEP through the NHS. In England, PrEP is available on a trial basis and there is a cap on numbers. In Scotland it is available nationwide to anyone who is considered at high risk of developing HIV.¹² Wales launched a three-year pilot of PrEP use in July 2017 which can be accessed through GUM (sexual health) clinics. There is no cap on the number of Welsh residents who can access PrEP.¹³ In Northern Ireland, all GUM clinics are offering

¹ Public Health England, [‘Trends in New HIV Diagnoses and in People Receiving HIV-related Care in the United Kingdom: Data to the End of December 2018’](#), 6 September 2019.

² F Nakagawa et al, [‘Projected Lifetime Healthcare Costs Associated with HIV Infection’](#), *PLoS One*, 22 April 2015, vol 10 no 4.

³ Royal College of Physicians, [‘HIV Pre-exposure Prophylaxis’](#), accessed 4 November 2019.

⁴ World Health Organisation, [‘Pre-exposure Prophylaxis’](#), accessed 4 November 2019.

⁵ NHS, [‘Treatment: HIV and AIDS’](#), accessed 4 November 2019.

⁶ Avert, [‘What is Pre-exposure Prophylaxis?’](#), accessed 4 November 2019.

⁷ NAM—the HIV/AIDS Information Charity, [‘How to Get PrEP in the UK’](#), July 2019.

⁸ Paul Birrell et al, [‘The Fall in HIV Infections in MSM in England During 2012 Through 2016: When Did it Begin and What Caused It?’](#), Public Health England, Medical Research Council and University of Cambridge, 22 June 2018.

⁹ UNAIDS, [‘Interview with UNAIDS PrEP Expert Rosalind Coleman’](#), 16 September 2019.

¹⁰ Terrence Higgins Trust, [‘Make PrEP Available’](#), accessed 4 November 2019.

¹¹ Department of Health and Social Care, [‘Health Secretary Announces Goal to End HIV Transmissions by 2030’](#), 30 January 2019.

¹² PrEP.Scot, [‘Will I Be Eligible for PrEP From the NHS in Scotland?’](#), accessed 4 November 2019.

¹³ Public Health Wales, [‘PrEPARED in Wales’](#), accessed 4 November 2019.

initial consultation and assessment appointments for a pilot trial that will last two years. Those eligible are referred to a centralised service in Belfast. There is currently no cap on numbers.¹⁴

Although the Department of Health and Social Care, in partnership with NHS England, has now committed to funding PrEP to some extent in England, this was not the case before December 2016. NHS England had argued that councils should pay for it as they oversee preventative health. This stance was successfully challenged by the National Aids Trust in the High Court and the Court of Appeal.¹⁵ Since then, local authorities and the NHS in England have worked together to provide the drug on a trial basis.¹⁶ In October 2019, the Secretary of State for Health and Social Care, Matt Hancock, stated that local authorities would “have to play their part” in the routine commissioning that is planned from 2020.¹⁷

PrEP Impact Trial in England

- In December 2016, NHS England committed to a large-scale PrEP trial, to last three years, which aimed to establish the demand for PrEP and how long people stay on the treatment in a real-world setting.
- In October 2017, NHS England launched the impact trial with 10,000 places. The number of places was increased to 13,000 in June 2018 to adjust for the initial high recruitment. In early 2019, NHS England’s Programme Oversight Board agreed to expand the trial to 26,000 places.
- In October 2019, NHS England provided an update that 15,700 people across 153 clinics had received PrEP through the trial. Almost all trial clinics are now open and recruiting with thousands of places on the trial remaining available across all eligible at-risk groups and geographies.¹⁸

Although places remain on the trial, some of the most popular sexual health clinics with LGBT people filled their trial quota in just weeks.¹⁹ This has led to the trial being branded a “postcode lottery” by LGBT media.²⁰ The limited availability of the treatment has also had an impact on new diagnoses. The BBC reported that, by October 2019, at least 15 people in England had tested positive for HIV while waiting for a place on the trial.²¹

In July 2019, NHS England and NHS Improvement met with the National Aids Trust, the Terrence Higgins Trust and the Prepster campaign to discuss specific locations where people were unable to access PrEP, several of which are in London. Chelsea and Westminster Hospital has since confirmed that it will re-open PrEP enrolment.²²

¹⁴ I Want PrEP Now, ‘[PrEP on the NHS](#)’, accessed 4 November 2019.

¹⁵ Practical Law, ‘[Court of Appeal Confirms NHS England Has Power to Commission HIV Preventative Treatment](#)’, 29 November 2016.

¹⁶ London Councils, ‘[The National PrEP Impact Trial: New Developments](#)’, 7 March 2019.

¹⁷ [HC Hansard, 29 October 2019, col 191](#).

¹⁸ NHS England, ‘[PrEP Trial Updates](#)’, October 2019.

¹⁹ Pink News, ‘[Gay Men Seeking HIV-preventing PrEP Drugs are Being ‘Turned Away’ from Sexual Health Clinics Over Trial Capacity](#)’, 21 March 2018.

²⁰ Gay Star News, ‘[“Postcode Lottery” is Stopping People Getting PrEP in England](#)’, 10 July 2019.

²¹ BBC News, ‘[HIV Diagnosis for 15 Men Waiting for Drug on NHS](#)’, 4 October 2019.

²² NHS England, ‘[PrEP Impact Trial: Letter to the National Aids Trust, the Terrence Higgins Trust and the Prepster Campaign](#)’, 5 July 2019.

Concerns About Expanding PrEP Provision

There have been some concerns about widening access to PrEP. These include:

- Funding PrEP has an opportunity cost, particularly as it can be characterised as “a more expensive way of preventing HIV, in terms of its cost ‘per dose’, than most other methods”.²³ The funds could be allocated elsewhere in the NHS and yield more marginal benefit.²⁴
- A rapid expansion in PrEP provision could place local authorities under strain.²⁵
- People using PrEP could engage in more risky sexual behaviour, for instance, they might discontinue condom usage or increase their number of sexual partners.²⁶

In 2016, NHS England argued it was too costly to fund a full roll out of PrEP. However, in 2017 a study published in *The Lancet* found that a PrEP programme for men who have sex with men was cost effective and potentially cost saving in the long term. The study said this was partly because it can be expensive to treat people after they have acquired the virus.²⁷ Following publication of the study, NHS England concluded that “evidence to support the use of PrEP is building”.²⁸

One aim of the NHS England impact trial was to collect data which could assist local authorities, in partnership with the NHS, in planning for a national programme.²⁹ The Local Government Association has asked the Government to ensure that “adequate” funding is in place to support nationwide expansion, accompanied by a guarantee that any unforeseen costs associated with a full roll out do not fall on councils.³⁰

A systematic review in 2018 found no conclusive evidence that PrEP users increase sexual risk behaviours. Condom use in men who have sex with men is influenced by multiple factors.³¹ Nonetheless, there was a perception amongst healthcare professionals that PrEP may lead to increased risk behaviours, such as not wearing condoms.³² Parallels have been drawn with other treatments. In the 1960s, for example, the contraceptive pill was thought by some to promote promiscuity.³³

²³ PrEP in Europe, ‘[Is PrEP Worth It?](#)’, accessed 4 November 2019.

²⁴ *Daily Mail*, ‘[NHS Fights Back against Ruling Forcing it to Hand Out “Promiscuity Pill” that Prevents HIV as the £20m Cost will Hit its Ability to Treat Cancer and Give Limbs to Amputees](#)’, 2 August 2016.

²⁵ Health Service Journal, ‘[Councils Seek NHS Funding to Cover Drug Trial Pressures](#)’, 27 March 2019.

²⁶ NAM—the HIV/AIDS Information Charity, ‘[Meta-Analysis Finds High but Variable STI Rates in Prep Studies—Is Prep The Cause or a Potential Solution?](#)’, 11 January 2019.

²⁷ Valentina Cambiano et al, ‘[Cost-effectiveness of Pre-exposure Prophylaxis for HIV Prevention in Men Who Have Sex with Men in the UK: a Modelling Study and Health Economic Evaluation](#)’, *The Lancet*, 17 October 2017, vol 18 no 1, pp 85–94.

²⁸ NHS England, ‘[HIV Prevention Drug Could Save NHS £1 Billion Over 80 Years](#)’, 19 October 2017.

²⁹ NHS England, ‘[Update on the PrEP Impact Trial](#)’, 11 January 2019.

³⁰ Local Government Association, ‘[LGA Responds to NHS Funding for Expansion of Prep Trial](#)’, 23 January 2019.

³¹ Kellie Freeborn and Carmen Portillo, ‘[Does Pre-exposure Prophylaxis \(PrEP\) for HIV Prevention in Men Who Have Sex with Men \(MSM\) Change Risk Behaviour? A Systematic Review](#)’, *Journal of Clinical Nursing*, 3 August 2017.

³² F Venter, ‘[Exposure Ethics: Does HIV Pre-exposure Prophylaxis Raise Ethical Problems for the Health Care Provider and Policy Maker?](#)’, *Bioethics*, 24 June 2013, vol 28 no 6, pp 269–74

³³ NAM—the HIV/AIDS Information Charity, ‘[Lessons Learnt from the History of Contraception are Relevant for the Implementation of PrEP](#)’, 6 January 2016.

Reaction

Political Reaction

In its 2017 manifesto, Labour committed to ensuring “NHS England completes the trial programme to provide PrEP (pre-exposure prophylaxis) as quickly as possible, and fully roll out the treatment to high-risk groups to help reduce HIV infection”.³⁴

The same year, Norman Lamb, the then Liberal Democrat health spokesperson, said that “PrEP is a vital weapon in the fight against HIV, and it’s high time that it was made routinely available to those who are at risk of infection”.³⁵

Sector Comment

The Terrence Higgins Trust has welcomed the Government’s commitment to move towards routine commissioning for PrEP. In October 2019, the charity stated that it had had “a productive meeting” with Jo Churchill, Parliamentary Under Secretary of State at the Department of Health and Social Care. However, the charity also warned that it would be “holding [the Government] to account” on this undertaking.³⁶

Kat Smithson, Director of Policy at the National Aids Trust, emphasised in October 2019 that the NHS and local authorities in England “must work urgently to make routine commissioning a reality sooner rather than later”.³⁷ In the past, the roll out of PrEP has been slowed down by the delayed opening of centres, funding disputes and shortages of places.³⁸ In January 2019, campaigners celebrated the decision to double the size of the impact trial but were disappointed when the plans to expand were delayed days later by the Trial Advisory Board.³⁹ Stonewall has urged all candidates in the upcoming general election to ensure that PrEP is available through routine commissioning “from April 2020”.⁴⁰

The campaign #PrEPNow was launched in July 2018 and is supported by 31 organisations. These include various LGBT charities, such as Stonewall, the LGBT Foundation and GMFA—the gay men’s health project. The campaign initially called on NHS England and local authorities to ensure the routine availability of PrEP by 1 April 2019. More recently, the campaign has emphasised that although there are places remaining on the trial, clinics in some areas are oversubscribed and are turning people away. It has also stated that additional places must be well promoted, both to clinicians and patients, and that more should be done to ensure communities that are underrepresented benefit from the drug.⁴¹

³⁴ Labour Party, ‘[Labour Party Manifesto 2017](#)’, 16 May 2017, p. 67

³⁵ Evening Standard, ‘[Lib Dems Say HIV Prevention Drug Should Be Available on NHS](#)’, 10 May 2017.

³⁶ Terrence Higgins Trust, ‘[Transition from the PrEP Impact Trial to Routine Commissioning](#)’, 28 October 2019.

³⁷ National Aids Trust, ‘[NAT Statement on Universal Availability to HIV Prevention Medication PrEP](#)’, 4 October 2019.

³⁸ Univadis, ‘[PrEP to Move to Routine Commissioning From April 2020?](#)’ 30 October 2019.

³⁹ Vice, ‘[What’s Going on with the NHS PrEP Trial in England?](#)’, 1 February 2019; and NHS England, ‘[PrEP Trial Updates](#)’, October 2019.

⁴⁰ Stonewall, ‘[Come Out Voting: Our Manifesto](#)’, accessed 4 November 2019.

⁴¹ LGBT Foundation, ‘[LGBT Foundation’s Response to NHS England’s PrEP IMPACT Trial Investment](#)’, 11 January 2019.