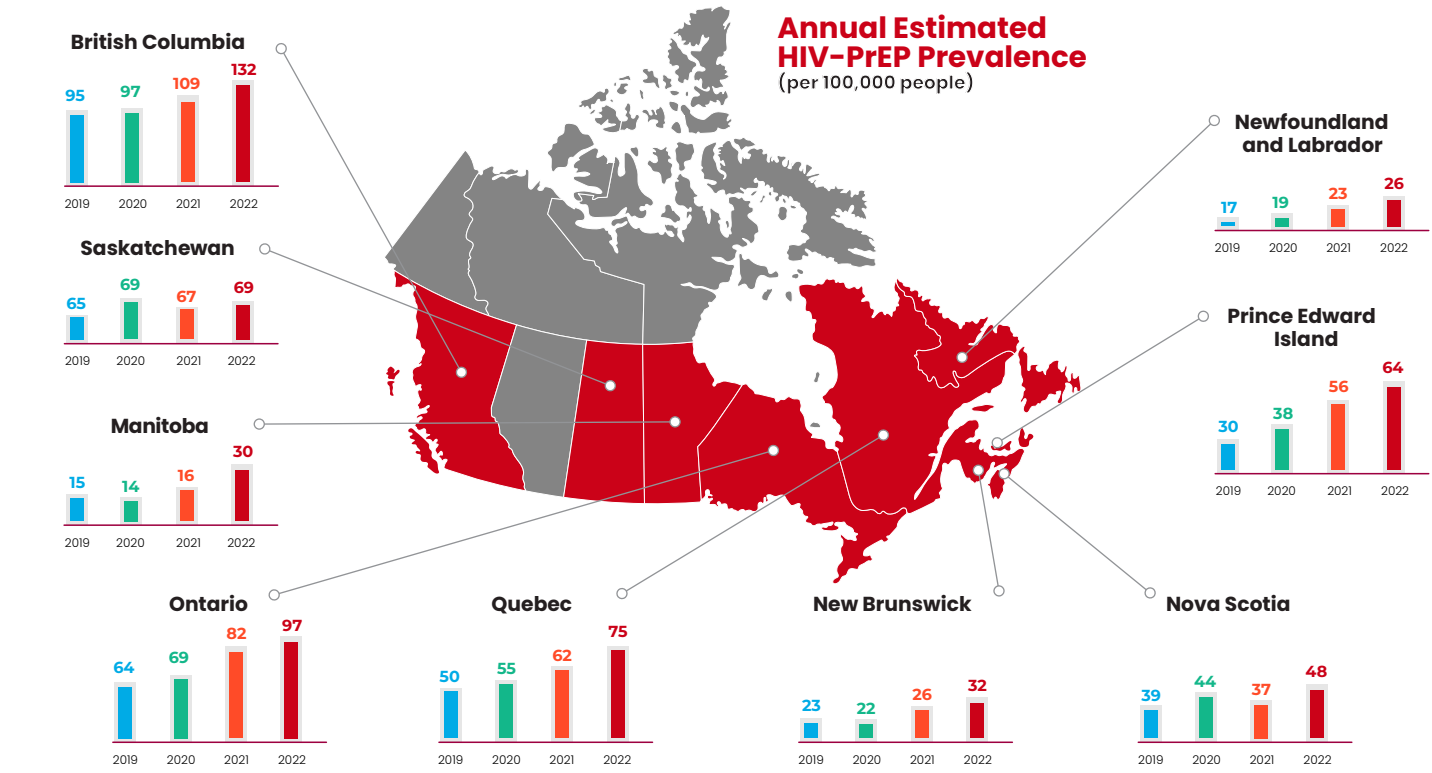
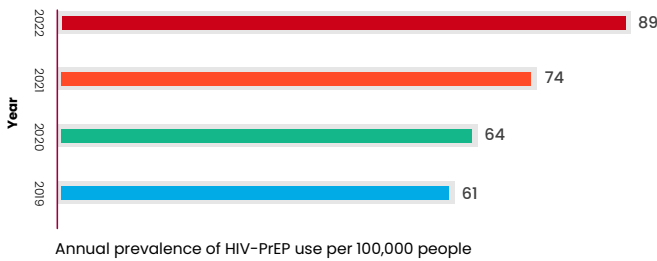


Trends in HIV Pre-Exposure Prophylaxis [HIV-PrEP] use in nine Canadian provinces, 2019 – 2022

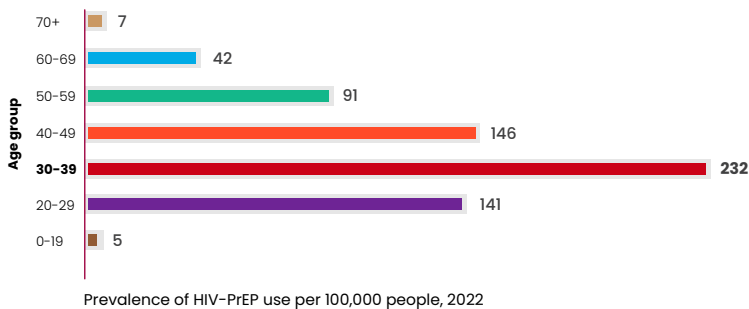
HIV prevention is critical to the goal of zero new HIV infections. HIV-PrEP is an important part of Canada's HIV prevention strategy.^{1,2,3}



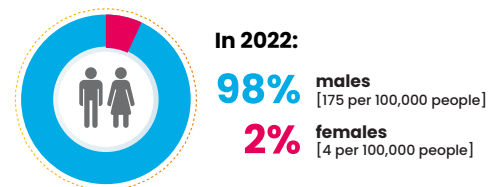
HIV-PrEP use is increasing each year



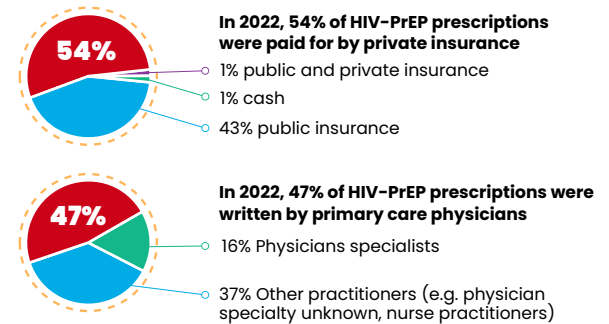
HIV-PrEP use is highest in those aged 30 – 39 years of age



HIV-PrEP is primarily used by males



Access to HIV-PrEP medication varies across Canada



References 1. Accelerating our response: Government of Canada five-year action plan on STBBI 2. Global health sector strategies on, respectively, HIV, viral hepatitis and STIs for the period 2022 – 2030 3. Canadian guideline on HIV pre-exposure prophylaxis and nonoccupational postexposure prophylaxis **Data sources** British Columbia: Annual estimates of persons using PrEP in British Columbia were provided by the BC Centre for Excellence in HIV/AIDS. All other provinces: Annual estimates of persons using PrEP in Canada were generated from IQVIA's geographical prescription monitor dataset. Data for the three territories and Alberta are not currently available and therefore have not been presented. **Limitations with the data** 1. Only prescriptions that were acquired from a community pharmacy are included (dispensations from hospital pharmacies, those provided at no cost, and those purchased online are not included). 2. The dispensation data cover approximately 60% of all retail pharmacies in Canada. Patient counts from participating pharmacists are projected to the whole population of each province by IQVIA using their proprietary algorithm. 3. An algorithm was used to assign a treatment indication to each person prescribed TDF-FTC. Any misclassifications could have produced an over- or under-estimate of the number of PrEP users. 4. Not all dispensed medications are consumed, which could contribute to over-counting of PrEP users **Notes** Any analysis of IQVIA data is arrived at independently and IQVIA is not responsible for any reliance by recipients of the data or any analysis thereof. The analyses, conclusions, opinions and statements expressed herein are those of the author(s) and not necessarily those of IQVIA.