

Treatment as Prevention: Interventions in a clinic setting

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How will our clinic protocols and interventions change?

Will we be offering TasP to

- all HIV positive patients
- Only those in long term stable relationships
- How will we encourage adherence?
- Do we need to offer a more flexible and holistic approach?



Identifying and treating any STIs is crucial to the success of treatment as prevention

Clinic protocols should ensure that a full sexual history and regular STI screening is a **routine** part of HIV clinical management.

This should be offered to both HIV positive and HIV negative partners who rely on treatment as an HIV prevention Chelsea and Westminster Hospital NHS

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Using Motivational Interviewing in a Clinic Setting

- Average patient contact can often be short 10 to 15 min
- However, motivational interviewing techniques have been shown to be effective in enhancing treatment adherence even in short consultations
- Emphasise patient choice and control
- Avoid creating resistance through coercion
- One to one structured discussions with individuals at high risk of STIs.
- Evidence based on behavioral change theories.
- Look at factors that help reduce risk-taking and improve selfefficacy and motivation



As clinics begin to incorporate protocols and information on the preventative benefit of treatment into their safer sex advice, there will be a need for clear accessible and consistent information to answer the many questions people who are HIV positive and negative will have.

Do our work force already have these skills?

If not, there needs to be a comprehensive programme of training to ensure that healthcare professionals and health promoters advise <u>accurately and consistently</u> around complex questions of risk



The key for the patient is to be well informed, to be well supported and to be able to make an educated choice.

The key for clinics is to have relevant and workable protocols, to have well informed and trained staff and to offer a flexible multi-disciplinary approach

If the future is to normalise Treatment as Prevention, we should strive not to minimalise it