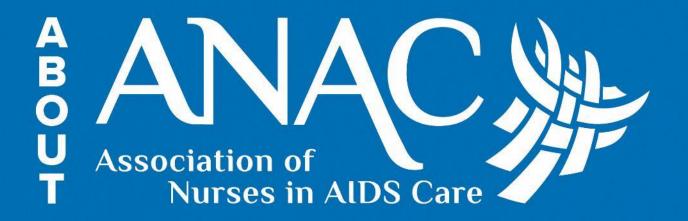


Faculty: Jennifer Belfry, DNP, MSN, FNP-BC, AAHIV Moderator: Jennifer Sobolik, CNP, AACRN, AAHIVS



Association of Nurses in AIDS Care Market Salam AIDS Care

ANAC fosters the professional development of nurses and others involved in the delivery of health care for persons at risk for, living with, and/or affected by the human immunodeficiency virus (HIV) and its comorbidities. ANAC promotes the health, welfare and rights of people living with HIV around the world.



Founded in 1987, we achieve our mission by:

- Creating an effective network of nurses and others in HIV care
- Studying, researching and exchanging information, experiences and ideas leading to improved care for persons with HIV/AIDS
- Providing leadership to the nursing community in matters related to HIV/AIDS
- Advocating for people living with HIV
- Promoting social awareness of issues related to HIV/AIDS

Inherent in these goals is the abiding commitment to the prevention of further HIV infection.

ANAC's Rural Committee

The Rural Committee seeks to identify the special issues and social determinants of health affecting both people living with and those who could benefit from preventative HIV services in sparsely populated areas, and to facilitate a network of clinicians to share expertise and develop solutions. The committee is comprised of nurse practitioners, and other members of the healthcare team working in HIV care and prevention who are based in rural areas, provide services to clients living in these areas or have an interest in rural health.

Co-chairs: Julia Green and Jenn Sobolik

For more information about the committee contact Sheila@anacnet.org



NCPD Information

Today's webinar is not eligible for NCPD (CNE) contact hours



For more information about ANAC visit our website!



Nursesinaidscare.org



Other learning opportunities

Visit Nursesinaidscare.org/webinars to view past webinars. Most provide NCPD.



- · Please keep your line muted throughout the webinar.
- If time allows, we will have a question and answer period at the end. Please enter questions into the chat.

Introductions

Jennifer Belfry, DNP, MSN, FNP-BC, AAHIVS

Clinician and Q Care Link Program Lead Q Care Plus

- No financial disclosures
- + Family Nurse Practitioner and Certified HIV Specialist (AAHIVM)
- + Clinical & Q Care Link Program Lead at Q Care Plus
- + 10 years of experience caring for PLWH and training providers in HIV and primary care









Inserting Doxy-PEP into Sexual Health Practices:

A Clinical and Programmatic Review

ANAC Webinar March 27 2025

Overview

- Doxy-PEP Overview
- Planning & Implementation of a Doxy-PEP Program
- Program Outcomes
- Lessons Learned
- Q&A



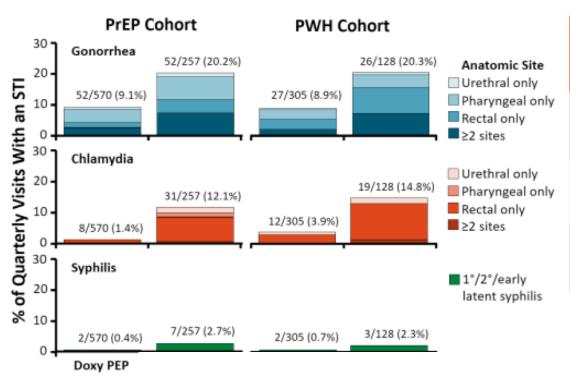
Doxy-PEP Overview

- Doxy-PEP: Doxycycline Post-Exposure Prophylaxis for bacterial STI prevention
 - Also called STI-PEP
 - Take 200mg of doxycycline orally once within 24-72 hours of sex to prevent chlamydia, syphilis and gonorrhea
 - Not Doxy-PrEP: which would be taken daily before sex
- Studies on Doxy-PEP completed in GBMSM and TGW:
 - IPERGAY substudy: Molina, et al. 2018
 - DoxyPEP study: Luetkemeyer, et al. 2023
 - DOXYVAC study: Molina, et al. 2024



Doxy-PEP Overview

DoxyPEP: STI Incidence By Anatomic Distribution and Study Arm and Cohort



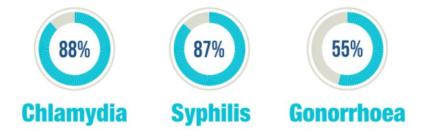
Reduction in STI Incidence	Risk Reduction (95% CI) P Value		
Per Quarter	PrEP Cohort	PWH Cohort	
Gonorrhea	0.45 (0.32-0.65) <.0001	0.43 (0.26-0.71) .001	
Chlamydia	0.12 (0.05-0.25) <.0001	0.26 (0.12-0.57) .0007	
Syphilis	0.13 (0.03-0.59) .0084	0.23 (0.04-1.29) .095	

Luetkemeyer. AIDS 2022. Abstr OALBX0103. Reproduced with permission.

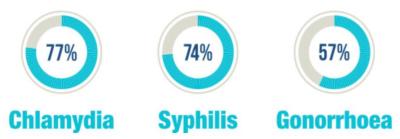
Care⁺ PRIDE 24/7

Doxy-PEP Overview

Efficacy against STI's in HIV-negative people



Efficacy against STI's in people living with HIV



An average reduction in incident STIs of 65%

- Many people taking doxy-PEP report a decrease in anxiety and stigma associated with STI.
- For some patients, using doxy-PEP can be empowering, facilitate sex positivity, and allow people to take charge of their own sexual health.



Doxy-PEP Patient Experience

Doxy-PEP Patient Experiences and Qualitative Research

- Ehsan, et al. 2024
 - O N=24, July-Sept 2023 interviews with gay or bisexual men
 - Participants concerned about antibiotic resistance and side effects, interested in more information on Doxy-PEP
- Samuel, et al. 2024
 - N=196, June 2023 survey, 94% cisgender male
 - Socioeconomic factors correlate whether participants were aware of doxy-PEP: college-educated and urban more likely to have heard of doxy-PEP
- Frederickson, et al. 2024
 - N=44, Doxy-PEP study participants, MSM and TGW
 - Doxy-PEP benefitted quality of life and mental health
- Perkins, 2023
 - N=24 MSM, and N=30 health providers
 - O Doxy-PEP enhanced intimacy and enjoyable sexual experiences
 - Decreased anxiety disclosing status to partners for PLWH
 - Providers expressed concerns prescribing Doxy-PEP



Doxy-PEP Studies

Doxy-PEP research updates:

Burgener, et al. (2025)

- 2025 CROI Abstract 1288: DoxyPEP Impact on the Microbiome of MSM and TGW on HIV PREP
- n=52, Canadian cohort in DuDHS study
- Minimal impact on gut microbiome over 12 months of Doxy-PEP use

Raccagni, et al. (2025)

- 2025 CROI Abstract 1284: Antimicrobial Consumption Among Users of DoxyPEP in Milan, Italy
- n=754, Milan, Italy Infectious Disease Unit Aug 2022 July 2024
- Doxy-PEP users achieved significant reduction in all considered antibiotics used for the treatment of bacterial STIs

Seong Ji, et al. (2025)

- 2025 CROI Abstract 162: DoxyPEP Eligibility, Use, and Potential for STI Reduction in Large HIV Cohort in Washington, DC
- Data 2019-2023, n=1,403 doxy-PEP eligible PLWH, only 13 prescribed doxy-PEP
- Minimal uptake of DoxyPEP among PLWH eligible for DoxyPEP even after STI diagnoses



Doxy-PEP Studies

Doxy-PEP antimicrobial resistance research:

Langelier, et al. (2024)

- n=150, analysis of sub-group from Doxy-PEP study
- Doxy-PEP use did not alter gut microbiome diversity, but did correlate with increases in occurrence of tetracycline antimicrobial resistance genes

Tantalo, et al. (2024)

- Lab based study of *T.pallidum* (syphilis) exposed to intermittent doxycycline
- Whole genome sequencing and minimal inhibitory concentration testing showed no drug resistance developed in the syphilis strains tested

Reichert & Grad (2024)

- Mathematical modeling study of doxy-PEP on gonorrhea prevalence and antimicrobial resistance among MSM in the US
- DoxyPEP expected to reduce gonorrhea incidence in the short term, but select for tetracycline resistant strains longer term, with no or little impact on Ceftriaxone resistance rates



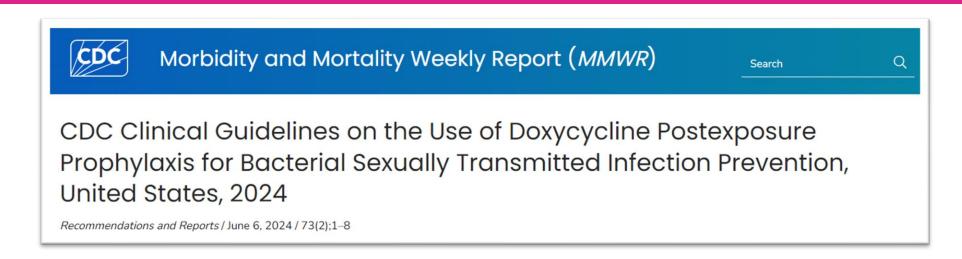
Doxy-PrEP Studies

Doxy-PrEP (*Pre-Exposure Prophylaxis) Studies:

- Bolan, et al. 2015
 - N=30, RCT MSM living with HIV with history of syphilis, length = 48 weeks
 - O Doxycycline 100mg daily arm significantly less likely to test positive for STI (odds ratio 0.27, CI 0.09-0.83) p = 0.02
- Grennan, et al. 2024
 - N=52, RCT MSM living with HIV with history of syphilis, length = 48 weeks
 - Canada trial, abstract presented at AIDS 2024: doxcycyline 100mg daily vs. placebo
 - Doxy-PrEP showed reduction in syphilis (79%), Chlamydia (92%), Gonorrhea (62%)
- Abe, et al. 2024
 - N=40, female sex workers in Japan, retrospective cohort study
 - Japan study, abstract presented at AIDS 2024: doxycycline 100mg daily compared to STI rates prior to Doxy-PrEP
 - O Doxy-PrEP significant in reduction of STIs overall; no increase in vaginal yeast or BV infections; participant surveys showed reduced anxiety regarding STIs



Clinical Guidelines

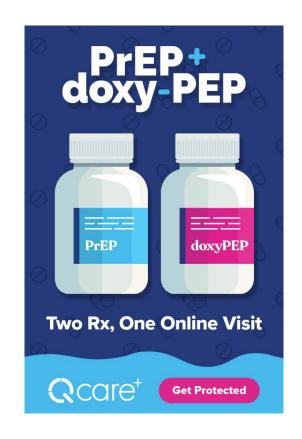


- CDC Clinical Guidelines for STI-PEP Released June 6 2024
 - Providers counsel all GBMSM and TGW with history of STI in the past 12 months about benefits and harms of Doxy-PEP and offer it via shared decision-making
 - No recommendation for Doxy-PEP in other populations as there is insufficient evidence for a guideline: use clinical judgment and shared decision-making with patients on benefits vs. harms of Doxy-PEP in other groups



How to Doxy-PEP

- Patient Education Points:
 - Doxycycline considerations:
 - Common side effects: GI upset, diarrhea, vomiting, esophageal erosion, skin photosensitivity
 - Take with food, big glass of water, stay upright 60min after taking it
 - Avoid taking at same time as dairy products, antacids, or supplements with iron/calcium/magnesium (blocks absorption)
 - Avoid in pregnancy or use reliable birth control methods
 - Check drug-drug interactions
 - Watch for Accutane (isotretinoin), estradiol (oral), blood thinners





How to Doxy-PEP

- Patient Education Points:
 - Offer comprehensive sexual health counseling and prevention strategies with Doxy-PEP:
 - STI testing every 3-6 months
 - Discussing prevention methods with partners
 - HIV PrEP (if not living with HIV)
 - U = U, TasP counseling
 - Condoms, barrier methods
 - Recommended vaccines for STI prevention

PrEP, PEP, & doxy-PEP!

Three Prescriptions, One Common Goal: HIV + STI Protection

Here's an easy guide to compare PrEP, PEP, and doxy-PEP - three different prescription medications that can contribute to a comprehensive prevention and protection program for HIV and STIs.



Pre-Exposure Prophylaxis (PrEP)

What is PrEP?

PrEP is a prescribed medication for individuals at high risk of HIV exposure. When taken regularly, it can decrease the risk of HIV infection by up to 99% and is most effective when paired with other prevention tools.

■ Who should use PrEP?

PIEP is recommended for individuals who are at high risk of HIV exposure. Such HIV exposure incidents include having an HIV-positive partner, irregular condon use, or frequent PEP use. PIEP is taken before sex and takes about 7 days to reach maximum efficacy against HIV for anal sex and 21 days for vaginal sex or injection drug use.

How do you use PrEP?

PrEP offers two methods for HIV prevention: a daily pill and a bi-monthly shot. The daily pill provides consistent protection, while the bi-monthly shot offers convenient, extended coverage. For PrEP to work effectively, taking it consistently without missing doses is essential.



Post-Exposure Prophylaxis (PEP)

What is PEP?

PEP is a prescribed medication that is taken shortly after potential HIV exposure with the aim to reduce the likelihood of HIV transmission. PEP is highly effective in preventing HIV if taken within 72 hours after possible exposure.

▼ Who should use PEP?

PEP should be considered if an individual is HIV-negative or unsure of their status and they believe they have been exposed to HIV within the last 72 hours.

▶ How do you use PEP?

the treatment as soon as possible, ideally within /2 hours of potential HIV exposure. The sooner PEP is taken, the more likely it is to stop HIV. The typical regimen involves taking prescribed medication daily for 28 days. This approach is designed to reduce the risk of HIV infection following specific high-risk incidents.



Doxycycline for PEP (doxy-PEP)

What is doxy-PEP?

Doxy-PEP utilizes the prescribed antibiotic doxycycline to mitigate STI risk when taken after sex. Think of it as a morning after pill for STIs. Taking doxy-PEP has been found to lower the risk of chlamydia by 88% and gonorrhea and syphilis well over 50%.

Who should use doxy-PEP?

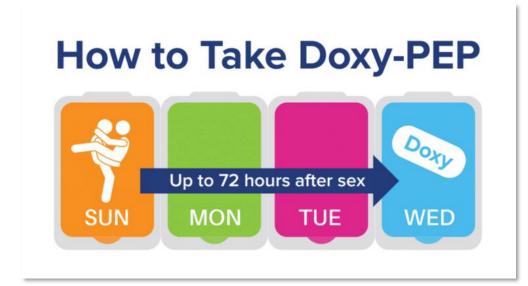
Doxy-PEP is advised for men who have sex with men and transgender women with a history of bacterial STIs. Those falling outside this category are encouraged to ask their healthcare provider about the potential advantages and associated risks of doxy-PEP basy-PEP has not shown efficacy in cisgender women.

How do you use doxy-PEP?

Individuals should consider doxy-PEP following unprotected sex. Taking a dose of doxycycline within 72 hours is important to reduce the risk of syphilis, gonorrhea, and chlamydia.



How to Doxy-PEP



- Prescribing Doxy-PEP:
 - Doxycycline hyclate (or monohydrate) 100mg tablet (or capsule)
 - Any low cost generic ok to sub, the
 200mg tablets are brand and pricey
 - Sig: Take 2 pills by mouth within 24 hours of sex, no later than 72 hours
 - Max dose 200mg in 24 hours
 - Dispense #50 pills (25 doses) for 30 days
 - Advise patient to let you know if they need a refill sooner than the 3 month check in



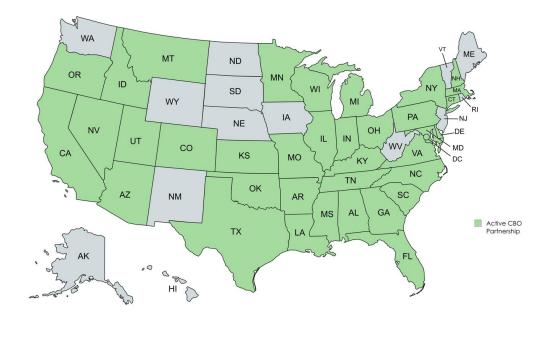
Planning & Implementation of **Doxy-PEP Program**





Q Care Plus (QCP) Overview

- Mission: Through technology and community partnerships, we provide quality, stigma-free access to all, regardless of how individuals identify and their varying abilities.
- HIV PrEP telehealth practice started in 2020, now with 340B relationships with local community-based organizations in 36 states plus the District of Columbia





Implementation of Doxy-PEP at Q Care Plus

- July 2023: planning stage for Doxy-PEP implementation
 - Resource: NCSD Doxycycline as STI-PEP Implementation Toolkit, August 2023 (LINK)
 - Developed Qcare+ Clinicial Doxy-PEP Protocol and SOP
 - Integrated Avita Pharmacy Doxy-PEP Pharmacy workflow
 - Determined cost structure to keep cost to patient \$0
 - Platform/EMR changes to accommodate Doxy-PEP workflows and data tracking
 - Centralized communication for providers, pharmacy teams, clinical ops to coordinate
- Aug 2023: Doxy-PEP launched



Implementation of Doxy-PEP at Q Care Plus

- Launched August 15, 2023
- Marketing to promote the combined offer of:
 Doxy-PEP with HIV PrEP & to PLWH
- Offer to GBMSM + TGW only
- Required h/o STI in last 12 months unless exceptional circumstances
- Dispensed as doxycycline hyclate
 100mg #50 (up to 1 refill provided per quarter, only with patient education)
- Plan to measure STI prevention & patient engagement effects



CLINICAL PROTOCOLS

Protocol Section: Patient Care
Version: 1.1
Original Date: July 26, 2023
Supersedes Date:
Page 1 of 4

STI Post-Exposure Prophylaxis (STI-PEP aka Doxy-PEP)

I. STI-PEP Efficacy and Responsible Use. Post-exposure prophylaxis for bacterial STIs ("STI-PEP" or "DoxyPEP") is an effective medical and public health intervention for decreasing incident STIs when targeted appropriately to mitigate effects of antibiotic overuse. For benefits to outweigh risks, the intervention should be targeted to HIV PrEP users or PLWH who are MSM/TGW and who report a history of STI(s). Qualitative evidence suggests there is great interest in engaging in STI-PEP on the part of such community members who are counseled on its availability and recommended use.



Implementation: Provider Education

How to Offer Doxy-PEP in a PrEP Visit:

- First question: "Are you here for PrEP and also doxy-PEP?"
- Mid-Sexual History: "Oh, I see you've had syphilis in the past, have you heard about doxy-PEP yet?"
- End of Visit Counseling: "There are other ways to prevent bacterial STIs like chlamydia, syphilis, and gonorrhea: condoms, talking to partners about their practices, getting tested, oh and doxy-PEP. Have you heard about doxy-PEP yet?"

Sample Documentation Plan:

Patient requests Doxy-PEP and is eligible for Doxy-PEP. Following shared-decision making discussion, patient will start Doxy-PEP. Drug interactions checked and none expected. Medication sent: Doxycycline #50 with no refills. Additional education on Doxy-PEP sent to patient via messenger including dosing, prevention efficacy, and side effects.

Patient to continue PrEP and Doxy-PEP, testing quarterly for STIs as scheduled.

ICD10 Code: z20.2 Contact with and (suspected) exposure to infections with sexual mode of transmission



Implementation: Provider Education

CLINICAL PROTOCOL:

- Released to providers for review, followed by 20min presentation/education and round-table Q&A discussion
- Providers exploring: how to offer doxy-PEP, when to offer it, what counseling is needed, and "the what-if's"

STAGED ROLL OUT:

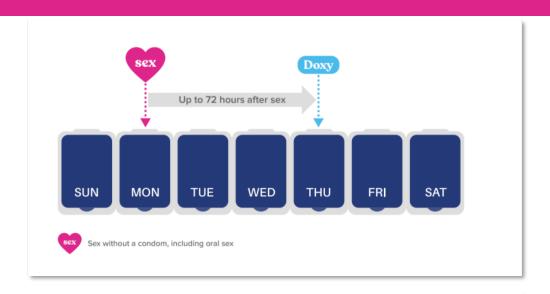
- CBOs offered Doxy-PEP after signing onto the program- gave skeptical providers time to see how it went in other areas before it arrived in their states
- Provider feedback & discussions on how program was going
- Reporting back patient experiences/comments in shared thread

FOLLOWING UP WITH SKEPTICS:

CDC Guidelines – helped convince more cautious providers to start prescribing

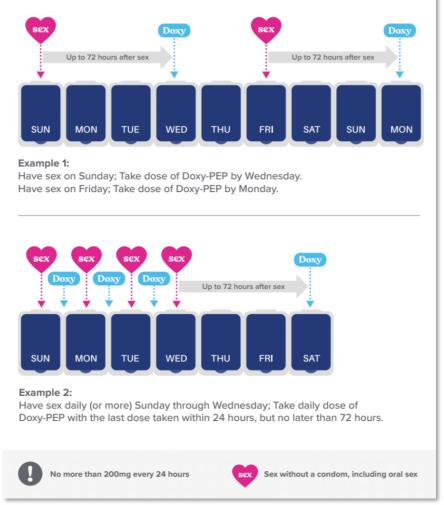


Initial Patient Communication Assets



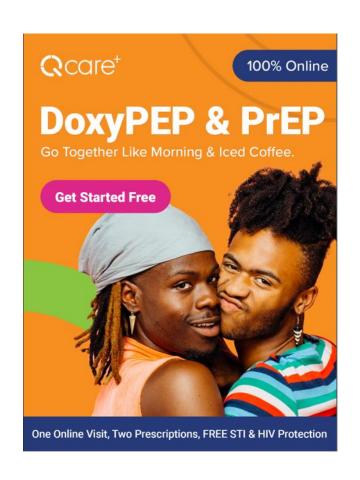
How to Take Doxy-PEP

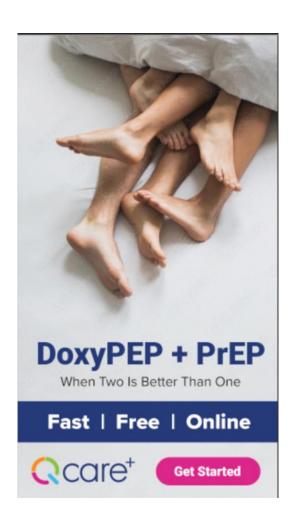






Implementation: Patient Communication Assets





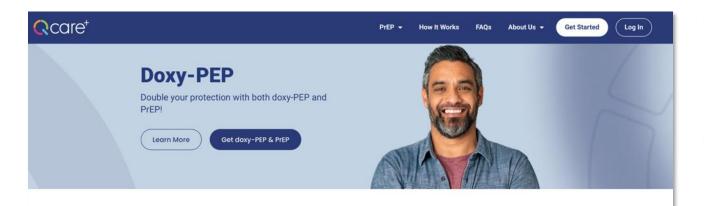
Marketing with a side of patient education

Ads placed on dating apps

Promote patient self-advocacy and empowerment



Implementation: Patient Communication Assets



Q Care Plus is expanding its services in active states to provide patients both PrEP and doxy-PEP prescriptions via our fast, convenient, online appointments and free, discreet Rx shipping.

If you're an existing Q Care Plus patient with an active PrEP prescription, ask your provider to discuss doxy-PEP with you during your next appointment. Doxy-PEP is only prescribed and shipped at the same time as your initial PrEP prescription or quarterly refill.

If you're a new Q Care Plus patient and are interested in PrEP or PrEP and doxy-PEP prescriptions, just click the Get Started button, fill out a few, short profile questions, and schedule your convenient, virtual visit with one of our providers. Online appointments usually take less than 15 minutes and your prescription(s) will be on their way to you within days.

> Welcome back, let us know if you have any questions.

What is "Doxy-PEP" (also known as STI-PEP)?

- · Doxy-PEP involves proactively taking an antibiotic as prevention for sexually transmitted infections (STI's).
- . Doxy-PEP medication is most effective when taken within 24 hours (and no later than 72 hours) after sex to prevent getting a sexually transmitted infection (STI or STD).
- . Taking doxy-PEP has been found to lower the risk of chlamydia by 88% and gonorrhea and syphilis well over 50%.







Who should use doxy-PEP?

- . Doxy-PEP is recommended for men who have sex with men and transgender women who have had a bacterial STI in the
- . Others should discuss doxy-PEP with their provider to
- understand the bene-. Doxy-PEP has not be

How do you use doxy-PEP?







Responsible Use of Doxy-PEP

Q Care Plus is committed to improving the sexual health and general wellness of LGBTQ+ community members. We recognize research is ongoing to evaluate the known benefit of doxy-PEP in HIV PrEP users and people living with HIV in reducing STI rates, weighed against the known and yet-unknown effect of this intervention on bacterial resistance and the microbiome. The Q Care Plus Doxy-PEP initiative involves carefy prescribing, judicious refills, and consistent patient counseling. We are engaging with investigators to evaluate our initiative's effectiveness in red implications.





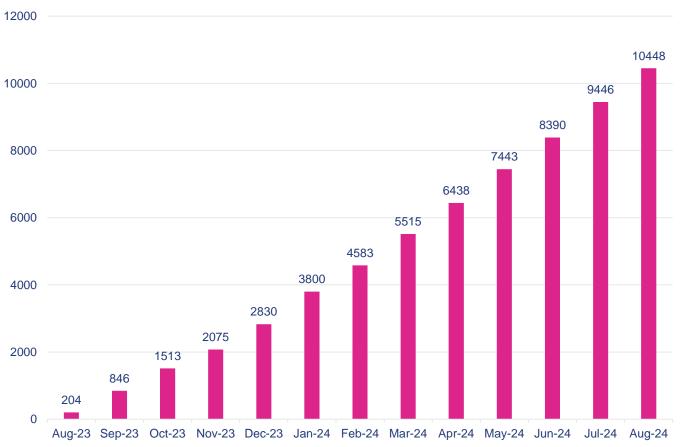
Program Outcomes





Uptake of Doxy-PEP at Q Care Plus



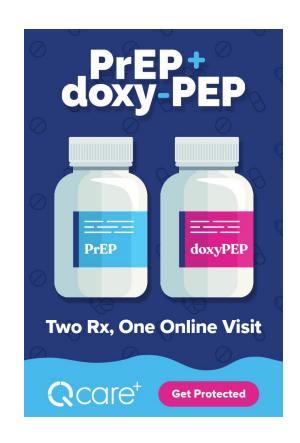


- August 2023: Qcare+ launched Doxy-PEP as a free adjunct treatment in our HIV PrEP and Longitudinal HIV care services
- October 2023: Growth of Doxy-PEP program to 13 states
- Jan 2024: Doxy-PEP program active in 22 states + D.C.
- May 2024: Doxy-PEP program active in 31 states + D.C.



Early Success of Q Care Plus Doxy-PEP Implementation

- Successes of Qcare+ Doxy-PEP program:
 - Engaged more patients in HIV PrEP care via Doxy-PEP interest
 - Educated 10,000+ patients on Doxy-PEP and PrEP
 - Expanded access to Doxy-PEP to priority EHE populations
 - Marked decrease in STI+ results since January 2024





Doxy-PEP at Q Care Plus: Demographics

Characteristics of people prescribed doxyPEP at least once

Characteristic	n	%
Total	4278	
Age, mean (SD)	35.3 (10.9)	
Age, range	17-78	
Sex		
Male	4,244	99.2%
Female	18	0.4%
Intersex	3	0.1%
Missing	13	0.3%
ender (as reported)		
Male	4,095	95.7%
nonconforming	56	1.3%
Transgender female	48	1.1%
Gender queer	37	0.9%
Female	21	0.5%
Missing	13	0.3%
Transgender male	6	0.1%
intersex	2	0.0%

Data of first 6 months of the program: 08/01/2023 - 01/31/2024



Doxy-PEP at Q Care Plus: Demographics

S	exuality		
	Gay	3,116	72.8%
	Bisexual	847	19.8%
	No answer	207	4.8%
	Straight	95	2.2%
	Missing	13	0.3%
	Race		
	Caucasian	2,330	54.5%
	Black / African American	891	20.8%
	Prefer not to say	638	14.9%
	Asian	311	7.3%
	Native American or Alaska Native	78	1.8%
	Hawaiian or Pacific Islander	30	0.7%
	Ethnicity		
	Non Hispanic	3,128	73.1%
	Hispanic	1,137	26.6%
	Missing	13	0.3%

Data of first 6 months of the program: 08/01/2023 - 01/31/2024



Doxy-PEP Implementation:

Lessons Learned





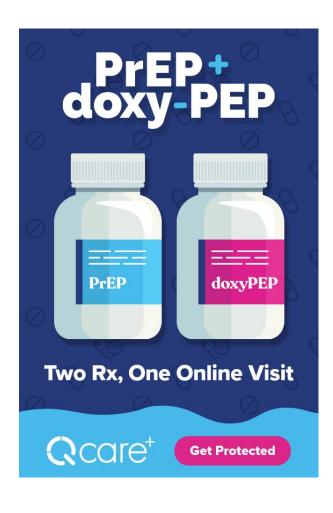
Lessons Learned *from Patients*



Patients taught us:

- Patients excited to access Doxy-PEP
 - Had many questions for providers added to visit times
- Some asked to have it on hand "just in case"
- May not be using it after every sexual encounter;
 "selective use" pattern emerging
- Doxy-PEP, Descovy, PEP, and PrEP patients confused amongst these similar terms/names
- Patients requesting prescription sig not say "it's for sex" – embarrassed when other providers can see it's sex-related

Lessons Learned *from Providers*



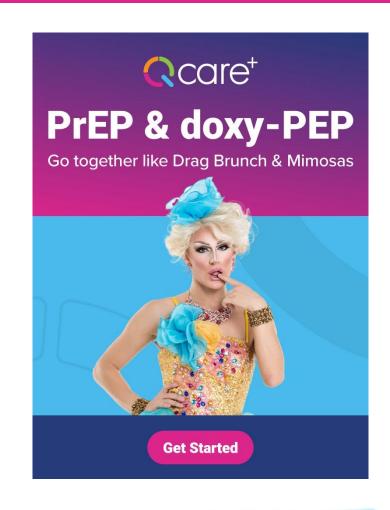
Providers taught us:

- Provider early adopters vs. skeptics
- Clear protocols and clinical guidelines will relieve much anxiety for skeptical providers
- Show how easy it is to integrate this into a PrEP visit, sexual health counseling, etc.
- Educate providers, assess, re-educate



Lessons Learned - Other

- Protocol/SOP questions arose:
 - Is there a testing requirement for Doxy-PEP?
 - Navigating AFAB requesting Doxy-PEP
 - For frequent users of Doxy-PEP, how to recommend dosing
 - Added guidance: patients with STI symptoms or +STI results
 - For HIV PEP: no change in antibiotic prophylaxis offer





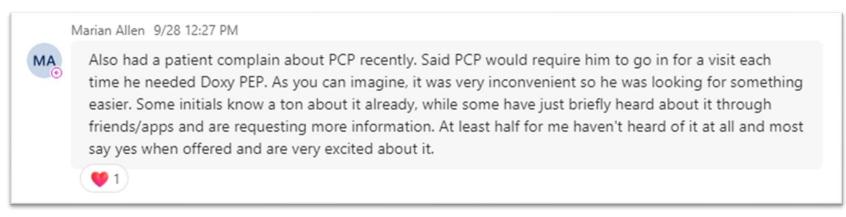
Lessons Learned - Other

- Other financial barriers to Doxy-PEP:
 - Insurances limiting amount of doxycycline dispensed per month or at once
 - Occasional insurance copays \$25-\$35 for #50 pill bottle
 - Coordination with local pharmacy(s) when rolling out doxy-PEP
 - Patients without insurance



Patient Experiences Point to Local Challenges

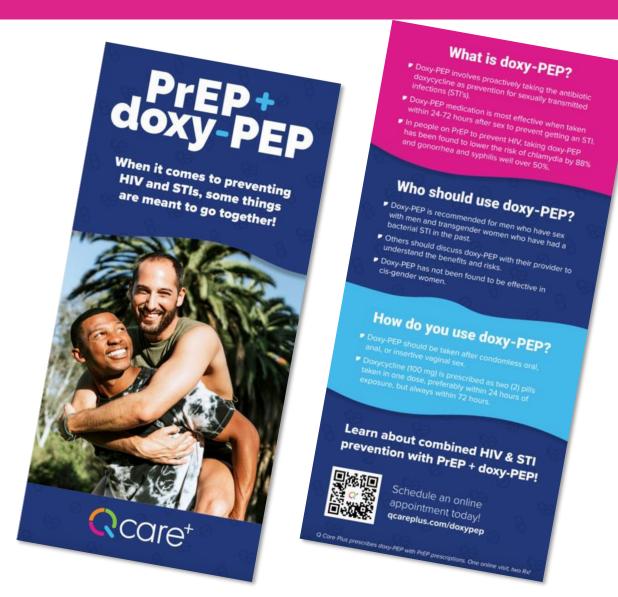
Patients report local challenges: lack of provider, provider refusing to prescribe or insufficient quantities, fear of discussing Doxy-PEP with a local provider







Q Care Plus Doxy-PEP: Patient Communication



Patient & Provider Education

PrEP, PEP, & doxy-PEP!

Three Prescriptions, One Common Goal: HIV + STI Protection

Here's an easy guide to compare PrEP, PEP, and doxy-PEP - three different prescription medications that can contribute to a comprehensive prevention and protection program for HIV and STIs.



Pre-Exposure Prophylaxis (PrEP)

What is PrEP?

PrEP is a prescribed medication for individuals at high risk of HIV exposure. When taken regularly, it can decrease the risk of HIV infection by up to 99% and is most effective when paired with other prevention tools.

Who should use PrEP?

PrEP is recommended for individuals who are at high risk of HIV exposure. Such HIV exposure incidents include having an HIV-positive partner, irregular condom use, or frequent PEP use. PrEP is taken before sex and takes about 7 days to reach maximum efficacy against HIV for anal sex and 21 days for vaginal sex or injection drug use.

How do you use PrEP?

PrEP offers two methods for HIV prevention: a daily pill and a bi-monthly shot. The daily pill provides consistent protection while the bi-monthly shot offers convenient, extended coverage. For PrEP to work effectively, taking it consistently without missing doses is essential.



Post-Exposure Prophylaxis (PEP)

▶ What is PEP

PEP is a prescribed medication that is taken shortly after potential HIV exposure with the aim to reduce the likelihood of HIV transmission, PEP is highly effective in preventing HIV if taken within 72 hours

Who should use PEP?

PEP should be considered if an individual is HIV-negative or unsure of their status and they believe they have been exposed to HIV within the last 72 hours.

▶ How do you use PEP?

the treatment as soon as possible, ideally within 72 hours of potential HIV exposure. The sooner PEP is taken, the more likely it is to stop HIV. The typical regimen involves taking prescribed medication daily for 28 days. This approach is designed to reduce the risk of HIV infection following specific high-risk incidents.



Doxycycline for PEP (doxy-PEP)

What is doxy-PEP?

Doxy-PEP utilizes the prescribed antibiotic doxycycline to mitigate STI risk when taken after sex. Think of it as a morning after pill for STIs. Taking doxy-PEP has been found to lower the risk of chlamydla by 88% and gonorrhea and syphilis well

■ Who should use doxy-PEP?

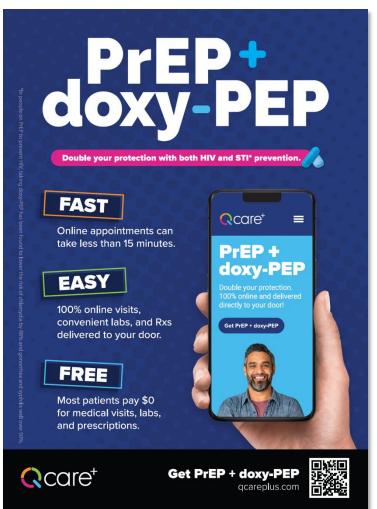
Doxy-PEP is advised for men who have sex with men and transgender women with a history of bacterial STis. Those falling outside this category are encouraged to ask their healthcare provider about the potential advantages and associated risks of doxy-PEP. Doxy-PEP has not shown efficacy in cisgender women.

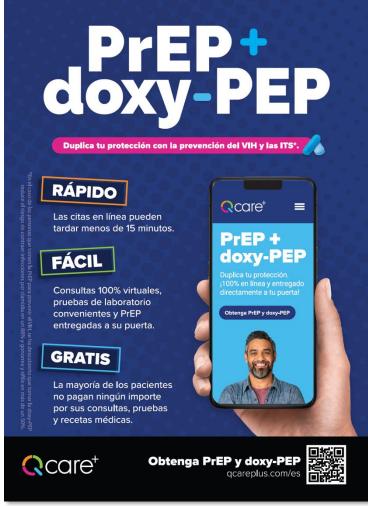
How do you use doxy-PEP?

Individuals should consider doxy-PEP following unprotected sex. Taking a dose of doxycycline within 72 hours is important to reduce the risk of syphilis, gonorrhea, and chlamydia.



Q Care Plus Doxy-PEP: Patient Communication





English/Spanish Collateral for Partners





Happy to take Questions!



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References

Abe, S., Shiojiri, D., Kawashima, A., Uemura, H., Ando, N., Mizushima, D., Gatanaga, H., Oka, S. (2024). Doxycycline PrEP prevents STIs without affecting vaginal bacterial flora in female sex workers. AIDS 2024, July 22-26, Munich, Germany. Abstract #7497 link: https://programme.aids2024.org/Abstract/?abstractid=7497

Bachmann LH, Barbee LA, Chan P, et al. CDC Clinical Guidelines on the Use of Doxycycline Postexposure Prophylaxis for Bacterial Sexually Transmitted Infection Prevention, United States, 2024. MMWR Recomm Rep 2024;73(No. RR-2):1–8. DOI: http://dx.doi.org/10.15585/mmwr.rr7302a1

Bolan, R. K., Beymer, M. R., Weiss, R. E., Flynn, R. P., Leibowitz, A. A., & Klausner, J. D. (2015). Doxycycline Prophylaxis to Reduce Incident Syphilis among HIV-Infected Men Who Have Sex With Men Who Continue to Engage in High-Risk Sex: A Randomized, Controlled Pilot Study. Sexually Transmitted Diseases, 42(2), 98. https://doi.org/10.1097/OLQ.000000000000016

Burgener, A.D., Grennan, T., Knodel, S., et al. (2025). DoxyPrEP Impact on the Microbiome of Men Who Have Sex With Men and Transgender Women on HIV PrEP. [Abstract 1288] Poster presented at: CROI Conference 2025, San Francisco, CA, March 9-12, 2025. Retrieved March 24, 2025, . Retrieved March 24, 2025, from https://www.croiconference.org/abstract/2528-2025-2/

Ehsan, R., D'Angelo, A. B., Westmoreland, D. A., & Grov, C. (2024). Perceptions about doxycycline post-exposure prophylaxis (Doxy-PEP) as an STI-prevention strategy among gay and bisexual men (GBM) in the United States: Results from a qualitative study. *Preventive Medicine*, 183, 107977. https://doi.org/10.1016/j.ypmed.2024.107977

Fredericksen, R. J., Perkins, R., Brown, C. E., Cannon, C., Lopez, C., Cohee, A., Dombrowski, J. C., Cohen, S., Malinski, C., Powell, M., Luetkemeyer, A. F., Celum, C., & Christopoulos, K. (2024). Doxycycline as Postsexual Exposure Prophylaxis: Use, Acceptability, and Associated Sexual Health Behaviors Among a Multi-Site Sample of Clinical Trial Participants. AIDS Patient Care and STDs, 38(4), 155–167. https://doi.org/10.1089/apc.2023.0289

Grennan, T., Tan, D.H., Mohammed, S., Azmin, R., Burchell, A.N., Burgener, A.D., Cameron, B., Edward, J., Lee, T., Moore, D., Morshed, M., Persaud, R., Romney, M.G., Singer, J., Wong, J., Hull, M. (2024). A pilot, randomized controlled trial of doxycycline pre-exposure prophylaxis versus placebo for prevention of bacterial sexually transmitted infections in men who have sex with men living with HIV. AIDS 2024, July 22-26, Munich, Germany. Abstract #11987 link: https://programme.aids2024.org/Abstract/?abstractid=11987

Langelier, C., Chu, V., Glascock, A., Donnell, D., Grabow, C., Brown, C., Ward, R., Love, C., Kalantar, K., Cohen, S., Cannon, C., Woodworth, M., Kelley, C., Celum, C., & Luetkemeyer, A. (2024). Doxycycline post-exposure prophylaxis for sexually transmitted infections impacts the gut antimicrobial resistome. Research Square, rs.3.rs-4243341. https://doi.org/10.21203/rs.3.rs-4243341/v1

Luetkemeyer AF, Donnell D, Dombrowski JC, Cohen S, Grabow C, Brown CE, Malinski C, Perkins R, Nasser M, Lopez C, Vittinghoff E, Buchbinder SP, Scott H, Charlebois ED, Havlir DV, Soge OO, Celum C; DoxyPEP Study Team. Postexposure Doxycycline to Prevent Bacterial Sexually Transmitted Infections. N Engl J Med. 2023 Apr 6;388(14):1296-1306. doi: 10.1056/NEJMoa2211934. PMID: 37018493; PMCID: PMC10140182.



References

Molina JM, Charreau I, Chidiac C, Pialoux G, Cua E, Delaugerre C, Capitant C, Rojas-Castro D, Fonsart J, Bercot B, Bébéar C, Cotte L, Robineau O, Raffi F, Charbonneau P, Aslan A, Chas J, Niedbalski L, Spire B, Sagaon-Teyssier L, Carette D, Mestre SL, Doré V, Meyer L; ANRS IPERGAY Study Group. Post-exposure prophylaxis with doxycycline to prevent sexually transmitted infections in men who have sex with men: an open-label randomised substudy of the ANRS IPERGAY trial. Lancet Infect Dis. 2018 Mar;18(3):308-317. doi: 10.1016/S1473-3099(17)30725-9. Epub 2017 Dec 8. PMID: 29229440.

Molina JM, Bercot B, Assoumou L, Rubenstein E, Algarte-Genin M, Pialoux G, Katlama C, Surgers L, Bébéar C, Dupin N, Ouattara M, Slama L, Pavie J, Duvivier C, Loze B, Goldwirt L, Gibowski S, Ollivier M, Ghosn J, Costagliola D; ANRS 174 DOXYVAC Study Group. Doxycycline prophylaxis and meningococcal group B vaccine to prevent bacterial sexually transmitted infections in France (ANRS 174 DOXYVAC): a multicentre, open-label, randomised trial with a 2 × 2 factorial design. Lancet Infect Dis. 2024 Oct;24(10):1093-1104. doi: 10.1016/S1473-3099(24)00236-6. Epub 2024 May 23. PMID: 38797183.

Perkins, R. (2023). Addressing Implementation Science Gaps for Doxycycline Post-exposure Prophylaxis (doxy-PEP) Among Men Who Have Sex With Men Who Use Antiretrovirals for HIV Treatment or Prevention—ProQuest Dissertation and Theses. University of Washington. Retrieved June 2, 2024, from https://www.proquest.com/openview/9c7562527da4fa132019b5b021577ede/1?pq-origsite=gscholar&cbl=18750&diss=y

Raccagni, A.R., Diotallevi, S., Lolatto, R., Bruzzesi, E., et al. (2025). Antimicrobial Consumption Among Users of Doxycycline Post-Exposure Prophylaxis in Milan, Italy. [Abstract 1284] Poster presented at: CROI Conference 2025, San Francisco, CA, March 9-12, 2025. Retrieved March 24, 2025, from https://www.croiconference.org/abstract/276-2025-td/

Reichert, E., & Grad, Y. H. (2024). Effects of doxycycline post-exposure prophylaxis for prevention of sexually transmitted infections on gonorrhoea prevalence and antimicrobial resistance among men who have sex with men in the USA: A modelling study. The Lancet. Microbe, 5(11), 100926. https://doi.org/10.1016/S2666-5247(24)00168-X

Samuel, K. D., Ellis, M. S., & Buttram, M. E. (2024). The impact of socio-environmental factors on doxycycline post-exposure prophylaxis awareness in the US: A cross-sectional study. *Sexual Health*, 21(3). https://doi.org/10.1071/SH23176

Seong Ji, Y., Barth, S.K., Castel, A.D., Byrne, M., et al. (2025). DoxyPEP Eligibility, Use, and Potential for STI Reduction in a Large HIV Cohort in Washington, DC. [Abstract 162] Oral presentation at: CROI Conference 2025, San Francisco, CA, March 9-12, 2025. Retrieved March 24, 2025, https://www.croiconference.org/abstract/2344-2025/

Tantalo, L. C., Luetkemeyer, A., P Lieberman, N. A., Nunley, B. E., Avendaño, C., Greninger, A. L., Celum, C., & Giacani, L. (2024). Long-term in vitro exposure of Treponema pallidum to sub-bactericidal doxycycline did not induce resistance: Implications for doxy-PEP and syphilis. BioRxiv: The Preprint Server for Biology, 2024.06.27.600921. https://doi.org/10.1101/2024.06.27.600921

