

# UCSF

## UC San Francisco Previously Published Works

### Title

Response to: Acceptability and feasibility of a pharmacist-led human immunodeficiency virus pre-exposure prophylaxis program in the Midwestern United States

### Permalink

<https://escholarship.org/uc/item/1qt9p2gw>

### Journal

Open Forum Infectious Diseases, 6(12)

### ISSN

2328-8957

### Authors

Dong, Betty J  
Lopez, Maria I  
Grant, Robert M

### Publication Date

2019-12-01

### DOI

10.1093/ofid/ofz497

Peer reviewed

## Response to: Acceptability and Feasibility of a Pharmacist-Led HIV Pre-exposure Prophylaxis Program in the Midwestern United States

Dear Editor,

Havens et al. highlight the potential for expanding the roles and responsibilities of pharmacists in the safe and effective delivery of pre-exposure prophylaxis (PrEP) for HIV prevention [1]. We disagree with the authors' opinion that the "initial prescription of PrEP in the community pharmacy setting is likely not practical." Their study did not involve community pharmacists initiating PrEP. The authors suggested that challenges in the community pharmacy setting, such as laboratory collection, couriered delivery of sexually transmitted infection specimens, and timely communication, were barriers, yet these were not study outcomes. Importantly, 2 community pharmacies, located in Seattle and San Francisco, have successfully implemented services to initiate and deliver PrEP and overcame these challenges [2, 3]. The Seattle site has initiated PrEP in >700 clients and receives ongoing reimbursement for these services. Both

pharmacies provide state-of-the-art PrEP services that are culturally appropriate and convenient to communities that have marginal access to medical services. The San Francisco community pharmacy model for PrEP was instrumental in the passage of Senate Bill 159 to create a statewide California protocol for community pharmacists to initiate PrEP and postexposure prophylaxis (PEP). The initial screening and delivery of PEP and PrEP in the community pharmacy setting have been demonstrated to be realistic and achievable. These experiences demonstrate the feasibility of community pharmacies initiating PrEP and PEP. We also believe that these services are necessary to expand PrEP utilization from its current low levels in order to decrease HIV transmission.

### Acknowledgments

**Potential conflicts of interest.** All authors: no reported conflicts of interest. All authors have submitted the ICMJE Form for Disclosure of Potential Conflicts of Interest. Conflicts that the editors consider relevant to the content of the manuscript have been disclosed.

Betty J. Dong,<sup>1</sup> Maria I. Lopez,<sup>2</sup> and Robert M. Grant<sup>3</sup>

<sup>1</sup>Department of Clinical Pharmacy, University of California, San Francisco, San Francisco, California, USA, <sup>2</sup>Department

of Clinical Services, Mission Wellness Pharmacy, San Francisco, California, USA, and <sup>3</sup>Department of Medicine, University of California, San Francisco, San Francisco, California, USA

### References

1. Havens JP, Scarsi KK, Sayles H, et al. Acceptability and feasibility of a pharmacist-led human immunodeficiency virus pre-exposure prophylaxis program in the Midwestern United States. *Open Forum Infect Dis* **2019**; 6(X):XXX–XX.
2. Lopez MI, Cohen SE, Cocohoba JM, et al. Implementation of PrEP at a community pharmacy through a collaborative practice agreement with San Francisco Department of Public Health. *J Am Pharm Assoc*. In press.
3. Tung EL, Thomas A, Eichner A, Shalit P. Implementation of a community pharmacy based pre-exposure prophylaxis service; a novel model for pre-exposure prophylaxis care. *Sex Health* **2018**; 15:556–61.

Received 26 October 2019; editorial decision 11 November 2019; accepted 29 November 2019.

Correspondence: M. I. Lopez, PharmD, Department of Clinical Services, Mission Wellness Pharmacy, 2424 Mission Street, San Francisco, CA 94110 ([maria@missionwellness.com](mailto:maria@missionwellness.com)).

### Open Forum Infectious Diseases®

© The Author(s) 2019. Published by Oxford University Press on behalf of Infectious Diseases Society of America. This is an Open Access article distributed under the terms of the Creative Commons Attribution-NonCommercial-NoDerivs licence (<http://creativecommons.org/licenses/by-nc-nd/4.0/>), which permits non-commercial reproduction and distribution of the work, in any medium, provided the original work is not altered or transformed in any way, and that the work is properly cited. For commercial re-use, please contact [journals.permissions@oup.com](mailto:journals.permissions@oup.com). DOI: 10.1093/ofid/ofz497