

Editor's Note

Ending the HIV Epidemic in the United States— The Roles of Increased Testing and Preexposure Prophylaxis

Julia M. Janssen, MD; Mitchell H. Katz, MD

Advances in antiretroviral treatment enable persons with human immunodeficiency virus (HIV) infection to live a normal lifespan, as long as they know that they are infected and adhere to treatment. Treatment that leads to an undetectable viral load prevents transmission of HIV to others. Since 2013, however, the rate of new HIV diagnoses in the United States has stabilized, not decreased. Continued viral

transmission occurs from persons unaware of their HIV status, or not receiving effective treatment. To end the AIDS epidemic, what strategies can be used to increase the rate of early diagnosis and treatment?¹

In this issue of *JAMA Internal Medicine*, MacGowan and colleagues report the findings of the eSTAMP study,² a Centers for Disease Control–sponsored randomized clinical trial that evaluated the effects of providing free HIV self-tests on the frequency of testing, diagnoses of HIV infection, and sexual risk behaviors. The study focused on a population at high risk of acquiring HIV, men who have sex with men, and recruited participants through the internet. Compared with the control

group, the intervention group (which received HIV self-tests) had significantly more testing, and newly identified HIV infections. In addition, there were 34 newly identified HIV infections in social network members of participants who used the self-tests. The study demonstrated that self-testing facilitates HIV testing in a high-risk population when tests are free and convenient; distribution of self-testing kits to social contacts via social networks provides another avenue for making testing more accessible and acceptable.

How might the findings of the eSTAMP study be interpreted in the context of increasing the availability of preexposure prophylaxis (PrEP)? Preexposure prophylaxis is a once daily medication that decreases the risk of acquiring HIV. Primary care physicians have key roles in prescribing PrEP. Also in this issue is a Special Communication from Khalili and Landovitz³ that explains how primary care clinicians can help put an end to HIV.³ In addition to reducing the incidence of HIV through prevention, the testing required to initiate and continue PrEP should also increase the rate of early HIV diagnosis. The self-testing kits targeting individuals at high risk of acquiring HIV complement the use of PrEP, and are another way to accelerate the end of the epidemic.

Author Affiliations: Department of Medicine, University of California, San Francisco (Janssen); NYC Health and Hospitals, New York (Katz).

Corresponding Author: Mitchell H. Katz, MD, NYC Health and Hospitals, 125 Worth St, Room 514, New York, NY 10013 (mitchell.katz@nychhc.org).

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