Transgender Prevention Research

HPTN Sub Regional Meeting
Lima, March 27th 2018

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Objective

• To identify research gaps that should be addressed within or outside the HPTN network.
What means transgender?

• Transgender is an umbrella term.

• “Transgender women” refers to people who were assigned male at birth and have a feminine or female gender identity.

• “Transgender men” refers to people assigned female at birth who have a masculine or male gender identity.

• Some people identify outside the male-female binary.
Prevalence depends on the definition used

Gender affirmation therapy

Sex reassignment surgery

By self report:

0.1 a 0.7%
355 per 100,000 individuals

By registry:

0.6 per 100,000 individuals

“Transsexual” diagnosis
Diagnostic Interview Survey
Transgender identity, self-reported
Gender nonconformity
Self-reported gender dysphoria

Collins et al J Sex Med 2016
What we already know about TGW

- Extremely high social vulnerability
- High risky sexual behaviors
- High burden of STIs

Violence, HIV, TB and other health problems

Premature death

In Argentina TGW life expectancy is estimated in 35 years vs. 83 in CGW
Extremely high social vulnerability

Survey among 452 TGW & 46 TGM

- Sexual work: 84
- Arrested (lifetime): 79
- Unemployed: 55
- Unestable housing: 42
- Secondary School: 32
- Alcohol abuse: 40
- Drug use: 42

2. Toibaro J et al Medicine 2009
Higher risky sexual behaviors

Survey among 452 TGW & 46 TGM

- Age of sexual initiation: 14 years
  - 40% before 13 years
  - 6% suffered sexual abuse during the first intercourse
  - 26% suffered sexual abuse during the lifetime
- High number of sexual partners per month: 80 (40-144)
- 84% has occasional partners, with 31% condom use
- 37% has stable partner, with 60% consistent condom use

2. Avila M, Aids and Behavior, 2017
High burden of STIs

<table>
<thead>
<tr>
<th>Disease</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>HPV</td>
<td>97%</td>
</tr>
<tr>
<td>Syphilis</td>
<td>50%</td>
</tr>
<tr>
<td>HBV</td>
<td>40%</td>
</tr>
<tr>
<td>Chlamydia</td>
<td>5%</td>
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<tr>
<td>HCV</td>
<td>4.5%</td>
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<tr>
<td>HTLV</td>
<td>1.8%</td>
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</tbody>
</table>

HIV prevalence in Argentina 34%

HIV incidence 10/100 people/y

72% of a sample of 350 surveyed TGW had at least one STI

Dos Ramos Farias et al, JID 2011
Gap for addressing prevention and care among TG people

Syndemic risks
- Human Rights Situation and Impact
- Stigma
Human Rights and HIV prevention

Lack of Sexual Minorities’ Rights as a Barrier to HIV Prevention Among Men Who Have Sex with Men and Transgender Women in Asia: A Systematic Review

237 epidemiological and behavioral studies from 22 Asian countries & SOGI index

James Anderson, and Steve Kanters
LGBT Health Volume 2, Number 1, 2015
High Willingness to Use HIV Pre-Exposure Prophylaxis Among Transgender Women in Argentina

Virginia Zalazar,1 Inés Arístegui,1,2 Thomas Kerr,3,4 Brandon D.L. Marshall,5 Marcela Romero,6 Omar Sued,1 and M. Eugenia Socías1,3,4,*

90% WILLINGNESS TO USE PREP

Table 2. Multivariable Logistic Regression Analysis of Factors Associated with Willingness to Use PrEP Among Transgender Women in Argentina

<table>
<thead>
<tr>
<th>Variable</th>
<th>Adjusted odds ratio</th>
<th>95% Confidence interval</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Highest level of educational level (≥high school vs. less than high school)</td>
<td>0.48</td>
<td>(0.21–1.05)</td>
<td>0.069</td>
</tr>
<tr>
<td>Place of residency (Buenos Aires city vs. other)</td>
<td>2.07</td>
<td>(0.92–4.66)</td>
<td>0.076</td>
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<tr>
<td>Sex worka (yes vs. no)</td>
<td>1.73</td>
<td>(0.71–4.23)</td>
<td>0.227</td>
</tr>
<tr>
<td>Discrimination by healthcare workersa (yes vs. no)</td>
<td>0.33</td>
<td>(0.12–0.88)</td>
<td>0.027</td>
</tr>
<tr>
<td>Casual partnersb (yes vs. no)</td>
<td><strong>4.26</strong></td>
<td>(1.73–10.51)</td>
<td>0.002</td>
</tr>
</tbody>
</table>

*aDenotes lifetime experience.
*bDenotes current behavior or activity.
41% OF TGW AVOIDED SEEKING HEALTHCARE

Factors associated were:

• Discrimination by healthcare workers (aOR = 3.36)
• Discrimination by other patients (aOR = 2.57)
• Currently living in Buenos Aires metropolitan area (aOR = 2.32)
• Been exposed to police violence (aOR = 2.20)
• Internalized stigma (aOR = 1.60)
GAPS

• PrEP in the era of the *test and treat*

• Gender affirmative therapies and health

• Other issues
PrEP in the era of the *Test & Treat*

- Size of the population interested? Definition?
- Best recruitment strategies? (RDS, Online or in the community)
- Testing preferences? (method, venue, Selftesting)
- PrEP PK and intermittent dosing
- Cabotegravir LA in TGW with silicone
- Best adherence measurement?
- PrEP for STIs?
- Management of depression, alcohol and drug abuse
Gender affirmative therapies

- Can be an incentive for retention & adherence?
- Interaction with ARVs?
- PK drugs in neovagina tissues?
- Differences of microbioma in neovagina tissues?
- Role of silicone as HIV reservoir or inducer of inflammation?
Other research gaps

- Resilience and protective factors
- Practices to Support young and adolescents LGBTQ
- Fertility preservation, parental advice
- Prevention and impact of childhood abuse
- Mental health and suicidal risk
- Chemsex, substance abuse

- Multi-level, biobehavioral interventions
- Multi-level structural interventions
What ideas we might propose?

- There is a need of specific studies on TG in South America? If yes, in what?
  - Size of population at risk, HIV incidence? PrEP?
- What might be needed to ensure recruitment and retention?
- What package of interventions might be tested vs. the standard of care to increase efficacy of interventions?
  - Social support, alcohol or drug abuse, legal advice, hormones, home visits, champions, mental health support, motivational interview, problem solving training, access to school or work, etc?