

## Abstract

**Purpose:** Human immunodeficiency virus (HIV) pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP) are highly effective medications given before or after an exposure to prevent against HIV seroconversion. This research takes a deeper look into what patient factors specialty pharmacists and providers consider when prescribing PrEP and PEP for HIV.

**Methods:** A survey was made for pharmacists and prescribers to fill out. Questions varied from patient-specific scenarios to general knowledge about HIV PrEP and PEP medications. These surveys were anonymous, and the only demographic question was regarding the role in the healthcare setting, which included pharmacist, physician, advanced practice registered nurse (APRN), or a physician's assistant (PA). After making these surveys, an email was sent out to these different healthcare professionals with a link to the survey and a brief description explaining what the survey was for.

**Results:** Only 1 physician and 2 pharmacists responded to the survey. Each question had differences and similarities between both professions. Typically, adherence questions led to both professions picking Apretude over Truvada and Descovy. Both sides did acknowledge that cisgender females are not able to use Descovy for PrEP. Truvada and Descovy were chosen a few times as initial therapy.

**Conclusion:** Each profession is an expert in their career and had their own reasoning for choosing what they chose. There are differences and similarities between both groups. It is a matter of what patient factors are being considered that leads to choosing medication therapy. Overall, the reasoning provided did justify each answer and showed the similarities and differences present between both groups.