Test paper - Guidance on the use of HIV Pre-exposure Prophylaxis (PrEP) in Hong Kong (August 2022, SCAS)

Please answer on the <u>answer sheet</u> and submit **by email** (<u>rrc@dh.gov.hk</u>) to Special Preventive Programme, Department of Health (DH) within the validity period.

| validity Period: 21 September 2025 - 31 December 202 | Validity Period: | 21 September 2023 - 31 December 2025 |
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| | College/ Programme | CME/ CPD/ CNE Point |
|---------------------------|--|------------------------|
| CME/CPD Accreditation: | MCHK CME Programme for Practising Doctors who are not taking CME Programme for Specialists | 1 (Accredited by DH) |
| Accreditation. | Other colleges | 0.5-1* |
| CNE Accreditation: | - | 1 |

^{*}Details of CME accreditation for specialists, please refer to <u>International Network for Continuing Medical Education and Continuous Professional Development</u>. Please contact respective authorities directly for CME/CPD accreditation if it is not on the list.

- 1. Which of the following is not true regarding the situation of MSM and PrEP in Hong Kong?
 - a. PrEP awareness among the MSM community has increased in recent years
 - b. More MSM reported ever use of PrEP in surveys over time
 - c. Less than 10% of the respondents in a 2020 MSM survey had never heard of PrEP
 - d. Regular public PrEP programme is available for MSM
 - e. None of the above
- 2. What are the principles of PrEP practice/programme?
 - a. PrEP should target people at high ongoing risk of HIV infection
 - b. PrEP is an effective biomedical component of combination HIV prevention for the uninfected
 - c. Adherence and correct use is critical and should be monitored
 - d. Other HIV prevention modalities should be delivered concurrently
 - e. All of the above
- 3. Which of the following investigations should be done for people on PrEP?
 - a. HIV testing every 3 months
 - b. STI screening, e.g. syphilis, Chlamydia, every 3 months
 - c. Baseline hepatitis B and C serology if unknown status
 - d. Regular renal function tests if on TDF/FTC
 - e. All of the above
- 4. Which of the following is not an indication for considering PrEP in HIV negative MSM with a 6-month history and ongoing condomless anal sex?
 - a. Diagnosis of bacterial STI, e.g. gonorrhea
 - b. Diagnosis of viral hepatitis
 - c. HIV positive partner on stable ART and fully suppressed viral load
 - d. Use of post-exposure prophylaxis in the previous year
 - e. Practice of chemsex

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- 5. Which of the following is not recommended for PrEP?
 - a. TDF/FTC
 - b. TAF/FTC
 - c. TDF
 - d. Cabotegravir
 - e. None of the above
- 6. Which of the following is not true about on-demand PrEP?
 - a. It is an alternative for MSM who have less frequent high risk sexual activities
 - b. TDF/FTC and TAF/FTC are drug choices
 - c. It should not be used in people with untreated chronic hepatitis B
 - d. None of the above
- 7. Which of the following is not part of the assessment and preparation for PrEP prescription?
 - a. Exclusion of pre-existing HIV infection
 - b. Counselling on the pros and cons of PrEP
 - c. Emphasis on drug adherence and regular monitoring
 - d. Education to watch out for HIV seroconversion
 - e. None of the above
- 8. Which of the following is not true about risk compensation from PrEP?
 - a. Risk compensation refers to an increase in condomless sexual contacts due to perceived HIV protection
 - b. Increase in STI is not uncommonly observed among PrEP users
 - c. There was study showing a decrease in some STI incidence after a wider uptake of PrEP
 - d. Timely STI screening, diagnosis and treatment is important
 - e. None of the above
- 9. Which of the following is not true about the PrEP studies implemented in Hong Kong for MSM?
 - a. Good acceptance of PrEP among study participants
 - b. Cost was a major concern reported for PrEP utilisation
 - c. STI incidence increased in on-demand and not daily PrEP users
 - d. More adverse effects were reported among daily PrEP users
 - e. None of the above
- 10. Which of the following is true about the management and support of PrEP users?
 - a. HIV risk reduction counselling should be provided
 - b. Chemfun has to be specifically addressed if present
 - c. Conduct periodic assessment on the need of continuing PrEP and the appropriate regimen
 - d. Withhold PrEP if there is evidence to suspect breakthrough HIV infection
 - e. All of the above

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Please submit the completed answer sheet by email (<u>rrc@dh.gov.hk</u>) to Special Prevention Programmes, Department of Health (DH) on or before 31 December 2025. The passing mark is 70%. Name: **Email:** Continuing Medical Education (CME) / Continuing Professional Development (CPD) Registration No. (Dental Council/Medical Council of Hong Kong): CME/CPD Programme Administrator for practising doctor who is not taking CME Programme for specialists/ practising dentist who is not taking CPD programme for specialists (please \checkmark the appropriate box) ☐ Department of Health ☐ Hong Kong Doctors Union ☐ Hong Kong Medical Association ☐ Hong Kong Academy of Medicine ☐ Hong Kong Dental Association **College for Specialists** (please \checkmark the appropriate box) ☐ Anaesthesiologists ☐ Community Medicine ☐ Dental Surgeons ☐ Emergency Medicine **☒** Family Physicians ☐ Obstetricians and Gynaecologists ☐ Ophthalmologists ☐ Orthopaedic Surgeons ☐ Otorhinolaryngologists ☐ Paediatricians ☐ Pathologists ☐ Physicians ☐ Psychiatrists ☐ Radiologists ☐ Surgeons Accreditation of CME point by organiser for this programme is not applicable. Hong Kong College of Family Physicians members are advised to submit individual application (additional accreditation) to college, in regard to the e-learning module/course(s) they took in that year. ♦ Please contact respective authorities directly for CME/CPD accreditation if it is not on the list. **Continuing Nursing Education (CNE) / Continuing Education in Midwifery (CEM)** CNE and CEM points will be granted to Hong Kong nurses by DH. **Category** (please \checkmark the appropriate box) ☐ Enrolled Nurse ☐ Registered Nurse ☐ Midwife Registration No. (Nursing Council / Midwives Council of Hong Kong): **Workplace** (please \checkmark the appropriate box) ☐ DH Nurses Clinic: Service: ☐ Non-DH Nurses Hospital & ward: Others (please specify): *♦* Records of CNE /CEM programmes will be kept for six years for the Nursing Council's or participants' reference.

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| 6 | • | 7. | 8. | 9. | 10. | |

Answers (please <u>answer</u> in the space provided below)