Project Brief: iPrEP-STI

Full Title of Study/Programme	**Integrating HIV Pre-exposure Prophylaxis and diagnostic STI care: An individualised public health approach (iPrEP-STI)**
Technical Focus Area/Key Words	STI management, STI diagnostics, antimicrobial resistance
Summary paragraph (max 200 words)	South Africa has some of the highest rates of sexually transmitted infections (STIs) and HIV globally. New STIs infections are increasing among South African adolescents where comprehensive and integrated quality of health services are limited. South African guidelines for treating STIs are not based on the diagnosis of the actual pathogen that causes the STI but uses the syndromic approach which means that people may get antibiotics that they do not need. Further, the majority of people with an STI, especially women, are asymptomatic, hence do not get the treatment that they need. Additionally those on PrEP showed a higher incidence of STIs; 21% of PrEP users had chlamydia compared to the global average of 3%. Hence, integrating diagnostic STI care and PrEP provides a unique opportunity to reduce STI incidence. The SA National Strategic Plan (NSP) for HIV, TB and STIs (2017-2022), highlights the need to address the high burden of STIs, detection and management of asymptomatic STIs with increased laboratory support and use of Point-of-Care (POC) testing for common STIs. Hence the aim of this study is to engage policy makers, healthcare providers and patients in discrete choice experiments to establish preferences for diagnosis and treatment of STIs and assess the feasibility of integrating these within the South African health-system.
Primary Objectives	1. Conduct a literature review on antimicrobial resistance and STIs in sub-Saharan Africa 2. Formative research on policy maker, healthcare providers and client preferences on different types of STI sample collection, diagnosis, receipt of results, treatment and partner notification using discrete choice experiments (DCE) 3. Determine the three most preferred permutations amongst the themes of STI sample collection, diagnosis, receipt of results, treatment and partner notification based on data derived from the DCEs 4. Determine feasibility of implementing the three most preferred permutations amongst the themes of STI sample collection, diagnosis, receipt of results, treatment and partner notification within the South African health system
Secondary Objectives	Not Applicable
Primary Endpoint/Outcome	Determination of feasible integrated models of diagnostic STI care

	using an individualised public health approach
Secondary Endpoint/Outcome	Not Applicable
Study Design	This study employs mixed methods approach comprising an analytic, cross-sectional study design and qualitative interviews
Study arms	Not Applicable
Study population	Clients at facilities receiving PrEP, as well as healthcare providers and key stakeholders (policy makers, key informants)
Study sample size	300-600 clients
Follow up/duration	Not Applicable
Study/Programme sites	Maria Rantho Clinic (Gauteng) and the Motherwell fixed and mobile clinic (Eastern Cape).
Study/Programme duration	15 months (01 March 2020 – 31 May 2021)
Intervention	Not Applicable
Operations	Have regular weekly internal meetings
Investigators	Dr Saiqa Mullick, Dr Collins Iwujii, Diantha Pillay
Other Partners & Collaborators	Brighton Sussex University
Sponsors/Donors	NIHR (UK)
Linked Sub Studies and post grad projects	Not Applicable
Publications/key presentations to date	None
Progress Update	Commenced systematic review on AMR in Sub-Saharan Africa, protocol registered on PROSPERO Awaiting ethics approval to start data collection
Frequency of donor narrative report	Quarterly partner reports
Overall Study/Project Contact	Diantha Pillay, Programme Manager, Wits Reproductive Health & HIV Institute (RHI), South Africa, Phone: +27 11 358 5363, Email: dpillay@wrhi.ac.za
Briefing owner and date	Diantha Pillay, 16 Oct 2020