Table 1. STIs among residents, January, 2022. Female syphilis cases include patients assigned as female at birth

syphins cases include patients assigned as female at ontin.						
	2022		2021			
	month	YTD	month	YTD		
Gonorrhea	426	426	274	274		
Male rectal gonorrhea	194	194	90	90		
Chlamydia	475	475	457	457		
Male rectal chlamydia	136	136	121	121		
Syphilis (adult total)	152	152	176	176		
Primary & secondary	30	30	42	42		
Early latent	72	72	80	80		
Unknown latent	15	15	17	17		
Late latent	35	35	37	37		
Neurosyphilis	1	1	3	3		
Congenital syphilis	0	0	1	1		
Female syphilis	21	21	12	12		

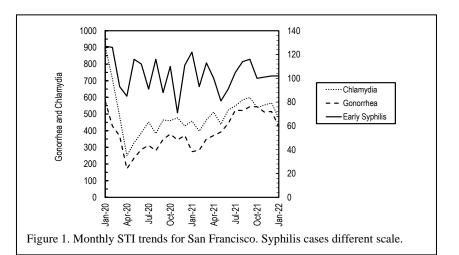


Table 2. Selected STI cases and rates for San Francisco by age and race/ethnicity, 2022 through January only. Rates equal cases per 100,000 residents per year based on 2010 US Census Data.

	(All races)		Asian/PI		African American		Hispanic		White	
	cases	rate	cases	rate	cases	rate	cases	rate	cases	rate
All ages										
Chlamydia	475	707.9	45	203.2	46	1,180.0	76	748.9	139	494.3
Gonorrhea	426	634.9	35	158.1	35	897.8	79	778.5	175	622.3
Early syphilis	102	152.0	13	58.7	16	410.4	22	216.8	43	152.9
Under 20 yrs										
Chlamydia	25	539.6	0	0.0	7	1,786.1	6	569.1	3	293.6
Gonorrhea	10	215.9	1	54.2	1	255.2	3	284.5	2	195.7
Early syphilis	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

Table 3. HIV testing among City Clinic patients, January, 2022.

	2022		2021	
	month	YTD	month	YTD
Tests	346	346	192	192
Antibody positive	0	0	3	3
Acute HIV infection	0	0	0	0

Note: All statistics are provisional until the annual report is released for the year. Morbidity is based on date of diagnosis. Totals for past months may change due to delays in reporting from labs and providers.

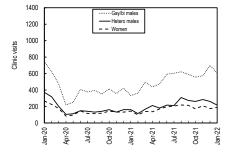


Figure 2. City Clinic visits by gender and orientation.

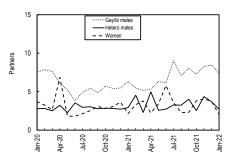


Figure 3. Average number of recent\* sex partners for City Clinic visits by gender and sexual orientation. \*Recall period is 3 months.

## First long-acting, injectable option for PrEP is now FDA approved!

The FDA approval of Apretude (cabotegravir extended-release injectable suspension) makes it the first long-acting injectable option for HIV prevention. Injectable cabotegravir provides an exciting opportunity to offer PrEP to people who are looking for an alternative to oral medications, have significant renal disease, and/or have challenges with maintaining PrEP adherence.

Apretude is administered as a single 600 mg (3 mL) gluteal intramuscular injection one month apart for the first two months and then every two months thereafter. There is an option to offer cabotegravir oral tablets (Vocabria) for the month prior to initiating injectable cabotegravir to assess side effects and tolerability. The estimated cost for Apretude is \$3,700 per 3 mL injection, which is comparable to annual costs for branded Truvada and Descovy. Patient assistance program information to cover the cost of the medication is not yet available. Health plans regulated by the California Department of Insurance are required to cover all PrEP drugs and related clinical services without cost sharing – including injectable PrEP.

Refer to the FDA-approved <u>full prescribing information</u> and updated <u>2021 CDC PrEP Guidelines</u> for more details.

The <u>SF City Clinic website</u> has resources to help with PrEP prescribing including a <u>provider guide</u> and <u>patient educational handout</u>. If you would like help from SFDPH with how to prescribe PrEP or get out-of-pocket costs covered, please contact the City Clinic Biomedical Prevention Coordinator at montica.levy@sfdph.org.

Thank you for prescribing PrEP and helping to prevent HIV!